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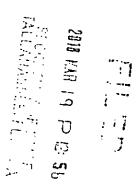
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MAR 2 0 2018

T. LEMEUX

TO: Amendment Section

COVER LETTER

Division of Corpor	ations		
NAME OF CORPOR	ATION: 429 RUTLAND H	OLDINGS INC	
DOCUMENT NUMBI			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please recum all corresp	ondence concerning this ma	rter to the following:	
ľ	MENACHEM PERSHEN		
		Name of Contact Person	1
_		Firm/ Company	
3	001 S OEAN DR, STE 525		
-		Address	
1	OLLYWOOD, FL 33019		
_		City/ State and Zip Cod	e
		•	
mpersh ————	in@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
MENACHEM PERSH	IN	at (212	380-3256 de & Daytime Telephone Number
Name of	Contact Person	. Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 nassec, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle essec, FL 32301

Articles of Amendment to Articles of Incorporation of

MA CAPITAL GROUP			
	ion as energently filed with the Flor	rida Dept, of State)	
17000043411	<u></u>		
(Docur	ment Number of Corporation (if kno-	lvn)	
ursuant to the provisions of section 607,1006, Florid s Articles of Incorporation;	la Statines, this Florida Profit Corpo	pration adopts the following amendm	ent(s)
If amending name, enter the new name of the c	orporation:		
29 RUTLAND HOLDINGS INC		The ne	a)
ime must be distinguishable and contain the wor Corp.," "Inc.," or Co.," or the designation "Corp. ord "chartered," "professional association," or the Enter now principal affice address, if applicable	n," "Inc," or "Co". A professional abbreviation "P.A."	"incorporated" or the abbreviation of the contain the corporation name must contain the	n P
rincipal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)x</u>		
. If amending the registered agent and/or registe		the name of the	
If amending the registered agent and/or registered new registered agent and/or the new registered Nama of New Registered Agent		the name of the	
new registered agent and/or the new registered		r the name of the	
Name of New Registered Agent	office address:	··· ··	
new registered agent and/or the new registered	office address:	, Florida (7ip Code)	
Nama of Naw Registered Agent New Registered Office Address:	office address: (Florida street address) (City)	, Florida	
Name of New Registered Agent	office address: (Florida street address) (Cityl	, Florida(Zip Code)	
Name of New Registered Agent New Registered Office Address: Wew Registered Office Address:	office address: (Florida street address) (Cityl	, Florida(Zip Code)	
Name of New Registered Agent New Registered Office Address: Wew Registered Office Address:	office address: (Florida street address) (Cityl	, Florida(Zip Code)	
Name of New Registered Agent New Registered Office Address: Wew Registered Office Address: Wew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	office address: (Florida street address) (Cityl	, Florida (Zip Code) bligations of the position.	ser
Name of New Registered Agent New Registered Office Address: Wew Registered Office Address: Wew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	office address: (Florida street address) (City) sistered Ayent: I am fumiliar with and accept the oi	, Florida (Zip Code) bligations of the position.	ر د د د د د د د د د د د د د د د د د د د
Name of New Registered Agent New Registered Office Address: Wew Registered Office Address: Wew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	office address: (Florida street address) (City) sistered Ayent: I am fumiliar with and accept the oi	, Florida (Zip Code) bligations of the position.	
Name of New Registered Agent New Registered Office Address: Wew Registered Office Address: Wew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	office address: (Florida street address) (City) sistered Ayent: I am fumiliar with and accept the oi	, Florida	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Anach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C= Chairman or Clerk; CEO = Chief Executive Officer; CFO .- Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones. Y as Remove, and Sally Smith, SV as an Add.

X Change	PT	John Doe		
X Remove	¥	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) Change	V	YOSEF RAPOPORT	101 S PLAZA PLACE #708	
X Add			ATLANTIC CITY, NJ 08401	
Remove				
2)Change		·		
Add				
Remove				
3) Change	 .			
Add				
Келюче				
4)Change		_		
Add			— — —	
, Remove				
5) Change Add			·	
Remove			·	
0 0				
6) Change Add				
Remove				

Page 2 of 4

. .

	rticles, enter change(s) here:). (Be specific)
_	
	.
_	
	
·····	
an attendment provides for an arch	
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:
(if not applicable, indicate N/A)	accompanied in the amendment itself:
••••,	
·,	

•

The date of each amendment(s) as date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(tto more than 90 days ufter amendment file date)	· · · · · · · · · · · · · · · · · · ·
Note: If the date inserted in this h document's effective date on the De	lock does not meet the applicable statutory filing requirements, the purtment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendatificient for approval.	nent(s)
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following sta- each voting group entitled to vote separately on the amendment(x):	tement
The number of votes cast	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) wes/were adopted notion was not required.	oted by the board of directors without shareholder action and shareh	older
The amendment(s) was/were adopaction was not required.	ated by the incorporators without shareholder action and shareholde	ī
X Dated 53	12/7017	
V Signature		
(By a dir selected	ector, president or other officer – if directors or officers have not be by an incorporator – if in the hands of a receiver, trustee, or other of diffuciary by that (iduciary)	een Court
1	MENACHEM M PERSHIN	
-	(Typed or printed name of person signing)	
F	RESIDENT	
_	(Title of person signing)	