

(R	Requestor's Name)	
(A	Address)	
(A	address)	
(C	City/State/Zip/Phone #)	
PICK-UP	MAIT	MAIL
(B	Business Entity Name)	
(D	Pocument Number)	
Certified Copies	Certificates of Statu	s
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R. Win.

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: MJMR Holdings I	ne.	
DOCUMENT NUM	IBER: P17000053996		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corn	espondence concerning this ma	tter to the following:	
	Carri Brown		
		Name of Contact Person	1
	MyCorporation		
	 -	Firm/ Company	
	26025 Mureau Rd. Ste 120		
		Address	
	Calabasas, CA 91302		
		City/ State and Zip Cod	e
For further information	E-mail address: (to be used on concerning this matter, please	sed for future annual report se call:	notification)
Carri Brown		877	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artinent of State;
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An	ailing Address mendment Section	Ameno	Address Innert Section
	vision of Corporations D. Box 6327		on of Corporations Building
	Hahassee, FL 32314	2661 B	xecutive Center Circle
		I allah:	issee, FL 32301

Articles of Amendment . to Articles of Incorporation of

4 **2** ()

7311 77.25

MJMR Holdings Inc.	•
(Name of Corporation a	s currently filed with the Florida Dept. of State)
P17000053996	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	nutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:
	The new
name must be distinguishable and contain the word "c" "Corp.," "Inc.," or Co.," or the designation "Corp." "word "chartered," "professional association," or the abbr	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SSS</u>)
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
Sqnatur	e of New Registered Agent, if changing

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:

(Attach 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 held. President, Treasurer, Director would be PTD.

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, V as Remove, and Sally Smith, SV as an Add. Example:

X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) X Change	SD	Haley Ross	1650 Neblett Rd
Add			Clarksville, TN 37040
Remove			
2) X Change	TD	Redgy Ross	1650 Neblett Rd
Add			Clarksville, TN 37040
Remove			
3) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
4) Change	-		<u></u>
Add			
Remove			
5) Change			
Add			
Remove			
0 41			
6) Change			
Add			
Remove			

Attach additional s	Iding additional Arti sheets, if necessary).	(Be specific)			
					
<u> </u>					
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-	-				
	-	<u></u> -			
					
provisions for in	provides for an excluplementing the ame able, indicate N/A)	nange, reclassific: adment if not cor	ntion, or cancellat ntained in the am	ion of issued share endment itself:	<u>s.</u>
					<u> </u>
					· 14.
					
-			* ***		

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date <u>if applicable</u> : One more than 90 days after amendment file date)	
(no more than 90 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
□ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 7/10/17	
Signature / The / Colt	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
John Ross	
(Typed or printed name of person signing)	
President	
(Title of person signing)	