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C. GOLDEN

OCT - 3 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: JMGK, Inc. FEIN 45-4425199					
DOCUMENT NUMBER: P17 000 0 71560					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Jerry Kubelle Name of Contact Person JMGK, Inc. Firm/ Company					
940 W Canton Avenue Apt B229 Address					
Winter Park, FL 32789 City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Terry Kubelk at (203) 610-9009 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations					

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

,	Articles of Incorporation of	FILEO
JM	GK. Inc.	2017 OCT -2 PM 1:27
(Name of Cor	poration as currently filed with the Florida	
P170	000071560	TALLAHASSEE, FLORIDA
(1	Document Number of Corporation (if known)	**
Pursuant to the provisions of section 607.1006, lits Articles of Incorporation:	Florida Statutes, this <i>Florida Profit Corporal</i>	tion adopts the following amendment(s) to
A. If amending name, enter the new name of	the corporation:	
		mi
name must be distinguishable and contain th "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co". A professional co	
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREE</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
D. If amending the registered agent and/or renew registered agent and/or the new regis		ne name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agential terms of the second		gations of the position.
	Signature of New Registered Agent, if chan	ging

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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	Jerry Kubelle	940 w Canton Ave
X Add			APT 6229
Remove			Winter Park, FL 32789
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damasa			

stach additional sheets, if necessary).	(Be specific)
	
	•
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
orovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
control approximately treatment 411/11	
(g. 100 approaches, maioric 11/A)	
(g. 100 approache) maiorie (1/A)	
(y approximation, maneure 1971)	
(g. 101 approach (maiotaic 11/11)	
(g. 10.1 spp. nouse, maneure 11/11)	
S To Spring Marie (17/4)	
(y spp. caoto, marcare 11/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
Effective date <u>if applicable</u> :	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing a document's effective date on the Department of State's records.	requirements, this date 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 by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. To must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for approve	val
by	.,
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder a action was not required.	action and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	n and shareholder
Dated <u>September 29, 2017</u> Signature John Lill	
(By a director, president or other officer - if directors or off	ficers have not been
selected, by an incorporator – if in the hands of a receiver, appointed fiduciary by that fiduciary)	trustee, or other court
Jerry Kubelle (Typed or printed name of person signin	g)
President	
(Title of person signing)	