P1800017555

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(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
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JUN 2 0 2018 S. YOUNG

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: EIGHT & MM TO	GO CORP	
DOCUMENT NUMB	P18000017555		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	DANIELA OCHOA		
•	EIGHT & MM TO GO COR	Name of Contact Person	1
-	EIGHT & WINT TO GO COP	· · · · · · · · · · · · · · · · · · ·	
	10910 NW 79TH STREET	Firm/ Company	
		Address	
	DORAL, FL 33178		
•		City/ State and Zip Cod	e
For further information	concerning this matter, pleas	se call:	
DANIELA OCHOA		786 at (719-8415
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep:	irtment 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)
Ame Divi. P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clitton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Table 1, 2301

Articles of Amendment

to

Artic	of of	eration			
EIGHT X MM TO GO	0 (0	RP			
(Name of Corporation as	currently file	d with the Florid	la Dept. of State	:)	
218,0000/7.5	11.				
(Document)	Number of Cor	poration (if knowr	n)	, .	
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this <i>Flor</i>	ida Profit Corpord	ation adopts the	following amend	ment(s) to
A. If amending name, enter the new name of the corpor	ration;				
				The	ew.
name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	Inc." or "Co".	A professional of			
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRES</u>	<u>-</u> 5 <u>S</u>)				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	- - -			18 JUN 19 PH	FILED
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		n Florida, enter t	the name of the	3: 58 ORIDA	Г
Name of New Registered Agent					
(.	Florida street aa	ldress)			
New Registered Office Address:		<u>.</u>	, Florida_	<i>(11. ()</i> 1)	_
	(City	,		(Zip Code)	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		and accept the obl	igations of the po	osition.	
Sionature	of New Regis	tered Agent, if cha	ngino		

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 f	Doc	
X Remove	<u>V</u> <u>Mike</u> .	Jones .	
X Add	SV Sally S	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	\mathcal{L}	Kelvin Mestra	9356 W 32 Ln
Add			Hialeah Gadens
X Remove		•	74P 33018
2) Change	D	Adriana Mardino	9356 W32 Ln
Add			Haleah Gardens
X Remove			31p 33018
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
<i>δ</i>) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
.,,,,,,	

The date of each amendment(s) adop	ion:	, if other than the
date this document was signed.		
Effective date if applicable:		1111
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	does not meet the applicable statutory filing requirements, this ment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amendment for approval.	ent(s)
	ed by the shareholders through voting groups. The following state h voting group entitled to vote separately on the amendment(s):	'ement
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopte action was not required.	I by the board of directors without shareholder action and shareh	older
☐ The amendment(s) was/were adopte action was not required.	I by the incorporators without shareholder action and shareholder	г
	tor, president or other officer – if directors or officers have not be an incorporator – if in the hands of a receiver, trustee, or other officers have not be a not provided by an incorporator – if in the hands of a receiver, trustee, or other officers have not be a not provided by an incorporator – if in the hands of a receiver, trustee, or other officers have not be a not provided by an incorporator – if in the hands of a receiver, trustee, or other officers have not be a not provided by an incorporator – if in the hands of a receiver, trustee, or other officers have not be a not provided by an incorporator – if in the hands of a receiver, trustee, or other officers have not be a not provided by an incorporator – if in the hands of a receiver, trustee, or other officers have not be a not provided by an incorporator – if in the hands of a receiver, trustee, or other officers have not provided by an incorporator – if in the hands of a receiver in the h	
appointed	fiduciary by that (fiduciary)	
_	DANIFUA OCHOA (Typed or printed name of person signing)	
	(Typed or printed name of person signing) ⇒	
	DIRFLOR	
 -	(Title of person signing)	