P18000030394

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MID TOWN PAW	N & JEWELRY, INC.	
DOCUMENT NUMI	BER: P18000030394		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this man	ter to the following:	
	David P. Fraser, Esq.		
	termination of the second of t	Name of Contact Persor	1
	Holmes Fraser, PA		
		Firm/ Company	
	711 5th Avenue South, Suite		
		Address	
	Naples, Florida 34102		
		City/ State and Zip Cod	e
dfras	er@holmesfraser.com		
		sed for future annual report	notification)
	is man address; (to the de	!	nonneution,
For further informatio	n concerning this matter, pleas	e call:	
David Fraser		239	228-7280
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton 2661 I	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILEC 2018 APR - 3 FM 12: 55

MID TOWN PAWN & JEWELRY, INC.

(Name of Co	orporation as currently	filed with the Florida	Dept. of State)	
P18000030394			· ,•	
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	6, Florida Statutes, this F	Iorida Profit Corporat	ion adopts the following amends	ment(s)
A. If amending name, enter the new name	of the corporation:			
			The no	
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," or "C	lo". A professional co		
B. Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>				-
				_
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF				-
D. If amending the registered agent and/or new registered agent and/or the new re		ess in Florida, enter th	e name of the	
Name of New Registered Agent		 		
	(Florida stre	ut addrass)		
	·	·	rt 11	
New Registered Office Address:		City)	, Florida(Zip Code)	
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		ith and accept the oblis	zations of the position.	
	O' - A A M D	agistavad Agant if chan		

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>	John Do	<u>oe</u>		
X Remove	<u>V</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title		Name	<u>Addres</u> s	
1) Change	DPTS		Bob Suci	 240 Shamrock Hill	
X Add				Novi, MI 48377	
Remove					
2) Change		_	!	 	_
Add					
Remove					
3) Change				 	
Add					
Remove					
4) Change		_		 	
Add					
Remove					
5) Change		_			
Add					_
Remove			!		
6) Change		_		 	
Add					
Remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<u></u>	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	and the state of the same stat
	

	March 29, 2018	
The date of each amendment(s) a date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the De	block does not meet the applicable statutory filing requirements, this datapartment of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes east for the amendment(s) approval.	s)
	proved by the shareholders through voting groups. The following statemed each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	topted by the board of directors without shareholder action and shareholde	er
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
April 6,	2018	
DatedSignature	N	
(By a c	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	David P. Fraser, Esq.	
	(Typed or printed name of person signing)	
	Incorporator	
	(Title of person signing)	·