P18000053763

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |

Office Use Only



100334308271

09/19/19--01024--005 (**85.00



Amend

OCT 05 2019

I ALBRITTON

COVER LETTER

TO: Amendment Section

Amendment Section
Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

| Division of Corpo | rations | | |
|---------------------------|---|--|--|
| NAME OF CORPOR | | <u>Managemei</u> | nt Group, INE |
| DOCUMENT NUMB | ER: | 0000160 | |
| The enclosed Articles of | of Amendment and fee are su | bmitted for filing. | |
| Please return all corresp | pondence concerning this mat | tter to the following: | |
| - | Mad | ison Shoe | maker |
| <u>.</u> | JUL Manage | Name of Contact Person Pren Group Firm/ Company | , INC |
| _ | 2332 Culic | ano St. | |
| | Coral Ge | rbles, FL | 33134 |
| _ | | City/ State and Zip Code | e |
| | Mashoeman E-mail address: (to be us | ker 20 gm sed for future annual report | notification) |
| For further information | concerning this matter, pleas | se call: | |
| | Shoemaker | at (954 | 882 -3715 |
| Name o | 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: |
| \$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) |
| Mai | ling Address | Street | Address |

Amendment Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment to

Articles of Incorporation of

| 1041 | Management | Group. | INC | |
|---|---|-------------------------------------|----------------------|--------------------------|
| | (Name of Corporation as curren | ntly filed with the Fl | orida Dept. of Stat | <u>e</u>) |
| | P18000053 | 763 | | <i>~</i> |
| | (Document Number | of Corporation (if kr | nown) | |
| Pursuant to the provisions of the Articles of Incorporation | f section 607.1006, Florida Statutes, th | is <i>Florida Profit Cor</i> | poration adopts the | following amendment(s) t |
| . <u>If amending name, ente</u> | er the new name of the corporation: | NA | | The new |
| 'Corp.," "Inc.," or Co.," | ble and contain the word "corporat or the designation "Corp," "Inc," or ional association," or the abbreviation | "Co". A profession | | or the abbreviation |
| | fice address, if applicable: IUST BE A STREET ADDRESS) | | Cerbles , | |
| C. Enter new mailing add (Mailing address <u>MAY</u> | dress, if applicable: BE A POST OFFICE BOX) | <u> </u> | Caliani Cables | 57. FL |
| | red agent and/or registered office ad nd/or the new registered office addre | | ter the name of the | <u> </u> |
| <u>Name of New Regi</u> | 2332 Cali | Shoema no St. street address) | rker | |
| New Registered Of | Tice Address: Worl Cab | • | , Florida | (Zip Code) |
| iew Registered Agent's Since the appoints | ignature, if changing Registered Age nent as registered agent. I am familia | nt: ir with and accept the | obligations of the p | osition. |
|) | Signature of New | v 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> | John Doe | |
|-------------------------------|--------------|-------------------|-----------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>SV</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) X Change | P | Madison Shoemaker | 2332 Caliano Si |
| Add | | | laral bubles |
| Remove | | | FL 33134 |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| tach additional sheets, if necessary). (Be specific) | NA |
|--|-------------------------------|
| | 10/17 |
| | * |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| · | |
| | |
| | |
| | |
| | |
| - | |
| | |
| | |
| | |
| | |
| | |
| | |
| n amendment provides for an exchange, reclassification, or ca ovisions for implementing the amendment if not contained in | incellation of issued shares, |
| ovisions for implementing the amendment is not contained in | ine amendment itseir: |
| (if not applicable, indicate N/A) | 4 |
| (if not applicable, indicate N/A) | n. IA |
| (if not applicable, indicate N/A) | n H |
| (if not applicable, indicate N/A) | n 1A |
| (if not applicable, indicate N/A) | n H |
| (if not applicable, indicate N/A) | n IA |
| (if not applicable, indicate N/A) | n H |
| (if not applicable, indicate N/A) | n IA |
| (if not applicable, indicate N/A) | n H |
| (if not applicable, indicate N/A) | n IA |
| (if not applicable, indicate N/A) | n IA |

. .

| The date of each amendment(s) adoption: | 09/17/2019 | , if other than the |
|--|--|--------------------------------|
| date this document was signed. | | |
| Effective date <u>if applicable</u> : | 09/14/2018 | |
| | no more than 90 days after amendment file date) | <u>_</u> |
| Note: If the date inserted in this block does not r document's effective date on the Department of Sta | meet the applicable statutory filing requirements, this ate's records. | date will not be listed as the |
| Adoption of Amendment(s) (CHEC | CK ONE) | |
| ☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appr | reholders. The number of votes cast for the amendme roval. | nt(s) |
| ☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gro | narcholders through voting groups. The following state oup entitled to vote separately on the amendment(s): | ement ement |
| "The number of votes cast for the amendm | nent(s) was/were sufficient for approval | |
| by(voting | | |
| (voting | group) | |
| ☐ The amendment(s) was/were adopted by the boar action was not required. | ard of directors without shareholder action and shareho | older |
| The amendment(s) was/were adopted by the incoaction was not required. | orporators without shareholder action and shareholder | |
| DatedSignature | | |
| (by a director, presiden selected, by an incorpo appointed fiduciary by | nt or other officer – if directors or officers have not been prator – if in the hands of a receiver, trustee, or other contact that fiduciary) | en ourt |
| <u>Hu</u> (Typ | adison Shoemaker ped or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |

1.00