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| PICK-UP                   | ☐ WAIT              | MAIL        |
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| Certified Copies          | _ Certificates      | of Status   |
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| Special Instructions to I | Filing Officer:     |             |
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATI            | ON: MAGHEN INC.                                |  |  |
|------------------------------|--|--|--|
| DOCUMENT NUMBER:             | P18000082618                                   |  |  |
| The enclosed Articles of Ar  |  | bmitted for tiling.  |  |
| Please return all correspond | lence concerning this ma                       | tter to the following:   |  |
| MA                           | GDIEL GARCIA                                   |  |  |
|                              | · · · · · · · · · · · · · · · · · · ·          | Name of Contact Person   | 1  |
| MA                           | GHEN INC.                                      |  |  |
|                              | <del></del>                                    | Firm/ Company  |  |
| 353                          | NW 175 ST                                      |  |  |
|                              |  | Address  |  |
| MIA                          | MI GARDENS, FL 330                             | 56   |  |
| -                            |  | City/ State and Zip Cod  | e  |
| magdielgg                    | @me.com  |  |  |
|                              | ~  | sed for future annual report                                       | nutitication)  |
|                              | 12-man address. (to be us                      | sed for fatare annual report                                       | notineation,   |
| For further information con  | cerning this matter, pleas                     | se call:   |  |
| HENDY CONTRICTOR             | onen.  | 205  | 000 200:   |
| HENRY GONZALEZ HE            |  | at (   | de & Daytime Telephone Number  |
| Name of Co                   | ntact 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 &<br>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) |
| Division P.O. Box            | ent Section<br>of Corporations                 | Amend<br>Divisie<br>Clifton  | Address Iment Section on of Corporations Building executive Center Circle              |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## FILED

2018 OCT 22 AM 10: 14

MAGHEN INC. (Name of Corporation as currently filed with the Florida Dept. of State) - United RAY OF STATE TALL AHASSEE, FL P18000082618 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: \_, Florida\_ New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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 raddress 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.

| X.Change                      | $\underline{PT}$ | John De     | <u>oe</u>           |                         |
|-------------------------------|------------------|-------------|---------------------|-------------------------|
| X Remove                      | <u>V</u>         | Mike Jo     | <u>ones</u>         |                         |
| X Add                         | <u>sv</u>        | Sally Si    | <u>mith</u>         |                         |
| Type of Action<br>(Check One) | Title            |             | Name                | <u>Addres</u> s         |
| 1) Change                     | P                | _           | LEIDGAM HOLDING LLC | 3531 NW 175 ST          |
| X Add                         |                  |             |                     | MIAMI GARDENS, FL 33056 |
| Remove                        |                  |             |                     |                         |
| 2) Change                     |                  |             |                     |                         |
| Add                           |                  |             |                     | <del></del>             |
| Remove                        |                  |             |                     |                         |
| 3 ) Change                    |                  | _           |                     |                         |
| Add                           |                  |             |                     |                         |
| Remove                        |                  |             |                     |                         |
| 4) Change                     |                  |             |                     |                         |
| Add                           |                  |             |                     |                         |
| Remove                        |                  |             |                     |                         |
| 5) Change                     |                  | <del></del> |                     |                         |
| Add                           |                  |             |                     |                         |
| Remove                        |                  |             |                     |                         |
| 6) Change                     |                  | _           |                     |                         |
| Add                           |                  | _           |                     |                         |
| Remove                        |                  |             |                     |                         |

| If amending or adding additional Arti<br>Attach additional sheets, if necessary). | (Be specific)   |
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| If an amendment provides for an exch  | ange, reclassification, or cancellation of issued shares, |
| (if not applicable, indicate NA)  | ndment if not contained in the amendment itself:          |
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|  | 10/19/2018   |                                    |
|--|--|------------------------------------|
| The date of each amendment(s) adoption: date this document was signed.                           |  | if other than the                  |
| Effective date if applicable:  |  |                                    |
|  | (no more than 90 days after amendment file date)   |                                    |
| <b>Note:</b> If the date inserted in this block does document's effective date on the Department | s not meet the applicable statutory filing requirements, the of State's records.   | nis date will not be listed as the |
| Adoption of Amendment(s)   | CHECK ONE)   |                                    |
| ☐ The amendment(s) was/were adopted by it by the shareholders was/were sufficient for            | he shareholders. The number of votes cast for the amenda<br>or approval.   | nent(s)                            |
| ☐ The amendment(s) was/were approved by must be separately provided for each voti                | the shareholders through voting groups. The following sting group entitled to vote separately on the amendment(s)                                  | alement<br>:                       |
|  | nendment(s) was/were sufficient for approval   |                                    |
| by(1   | "  |                                    |
| (1   | voting group)  |                                    |
| ☐ The amendment(s) was/were adopted by the action was not required.                              | he board of directors without shareholder action and share   | cholder                            |
| The amendment(s) was/were adopted by the action was not required.                                | he incorporators without shareholder action and sharehold  | ler                                |
| 10/19/2018   |  |                                    |
| Dated  |  |                                    |
| Signature  |  |                                    |
| (By a difector, pr<br>selected, by an ir   | resident or other officer – if directors or officers have not accorporator – if in the hands of a receiver, trustee, or otherry by that fiduciary) |                                    |
| HENRY  | GONZALEZ HERRERA   |                                    |
|  | (Typed or printed name of person signing)  |                                    |
| VÞ   |  |                                    |
|  | (Title of person signing)  |                                    |