## P190000 13711

| (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: |
|   |
|   |
| į                                       |
|   |
|   |
|   |
|   |

Office Use Only



600330272896

05/19/19--01010--039 \*\*35.00

SEURLIARY OF STATE
JALLAHASSEE, FLORIDA
JALLAHASSEE, FLORIDA

MI-SIM

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORA  | TION: M2 REMARKETI                          | NG CORP               |                              | <u> </u>   |
|--|---|-----------------------|------------------------------|--|
| DOCUMENT NUMBE   | R:  |                       |                              | <del></del>  |
|  | Amendment and fee are su                    | ibmitted for filing.  |                              |  |
| Please return all correspo   | ondence concerning this ma                  | tter to the following | ng:                          |  |
| A  | NTONIO MARCOS GALI                          | ES                    |                              |  |
| _  |   | Name of Cont          | act Person                   | n  |
| М  | 2 REMARKETING CORE                          | )                     |                              |  |
| _  | <del></del>                                 | Firm/ Cor             | npany                        | <del> </del>   |
| 24   | 141 NW 93RD AVE SUITI                       | E 104-A               |                              |  |
| _  |   | Addre                 | :SS                          |  |
| D  | ORAL, FL 33172                              |                       |                              |  |
|  |   | City/ State and       | Zip Cod                      | c  |
| MARCO  | OS.GALES@M2REMARK                           | CETING.COM            |                              |  |
|  | E-mail address: (to be us                   | sed for future annu   | ual report                   | notification)  |
| For further information of ANTONIO MARCOS C  | oncerning this matter, pleas                |                       | 954                          | 982-0057   |
|  | Contact Person                              | at (                  | Area Co                      | )<br>de & Daytime Telephone Number   |
|  | he following amount made                    | payable to the Flo    |                              | ,  |
| S35 Filing Fee   | ☐\$43.75 Filing Fee & Certificate of Status | _                     | ıv.                          | □\$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 |   |                       | Amend<br>Division<br>Clifton | Address Iment Section on of Corporations Building Executive Center Circle              |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## M2 REMARKETING CORP

| (Name  | of Corporation as curren                                     | tly filed with the Florida Dept. of Sta | te)  |  |  |
|--|--|---|--|--|--|
| P19000013711   | or corporation as turner                                     | med with the Florida Dept. 01 Sta       | <u>(C</u> )  |  |  |
|  | (Document Number   | of Corporation (if known)               |  |  |  |
| Pursuant to the provisions of section 607, its Articles of Incorporation:  | 1006, Florida Statutes, thi                                  | s Florida Profit Corporation adopts the | e following amendment(s)   |  |  |
| A. If amending name, enter the new na  | ame of the corporation:                                      |   | Ti   |  |  |
| name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | ation "Corp," "Inc," or                                      | "Co". A professional corporation na     | The new or the abbreviation me must contain the  |  |  |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)            |  | 2441 NW 93RD AVE SUITE 104-             | -A   |  |  |
|  |  | DORAL, FL 33172                         | <del></del>  |  |  |
|  |  |   |  |  |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                              |  | 2441 NW 93RD AVE SUITE 104-A            |  |  |  |
|  |  | DORAL, FL 33172                         |  |  |  |
|  |  |   | 19<br>SEI  |  |  |
| D. If amending the registered agent an<br>new registered agent and/or the new  | d/or registered office addresses registered office addresses | dress in Florida, enter the name of the | THE TARY TO SEE TA           |  |  |
| Name of New Registered Agent  ANTONIO MARCOS G   |  | ALES                                    |  |  |  |
| •  | 2441 NW 93RD AVE SU  |   |  |  |  |
|  | (Florida street address)                                     |   | <del>- 100   100</del> |  |  |
| New Registered Office Address:   | DORAL  | Florida                                 | \$ 33172<br>3  |  |  |
|  |  | (City)                                  | (Zip Code)   |  |  |
|  |  |   |  |  |  |
| New Registered Agent's Signature, if c<br>I hereby accept the appointment as regist                                  |  |   | position.  |  |  |
|  | Ann  | 2                                       |  |  |  |
|  | 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, an 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 = Chi Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officer. 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: X Change             | PT           | <u>John Doe</u>      |                                      |
|-------------------------------|--------------|----------------------|--------------------------------------|
| X Remove                      | <u>v</u>     | Mike Jones           |                                      |
| <u>X</u> Add                  | <u>sv</u>    | Sally Smith          |                                      |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>          | Address                              |
| 1) X Change                   | ŀ            | ANTONIO MARCOS GALES | 2441 NW 93RD AVE SUITE 104- <b>A</b> |
| Add                           |              |                      | DORAL, FL 33172                      |
| Remove                        |              |                      |                                      |
| 2) Change                     |              |                      |                                      |
| Add                           |              |                      |                                      |
| Remove                        |              |                      |                                      |
| 3 ) Change                    |              |                      | 79.                                  |
| Add                           |              |                      | AR S 7                               |
| Remove ·                      |              |                      | SSEE OF A                            |
| 4) Change                     |              |                      |                                      |
| Add                           |              |                      |                                      |
| Remove                        |              |                      |                                      |
| 5) Change                     |              |                      | <del></del>                          |
| Add                           |              |                      |                                      |
| Remove                        |              |                      |                                      |
| 6) Change                     |              | <del></del>          |                                      |
| Add                           |              |                      |                                      |
| Remove                        |              |                      |                                      |

| E. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific) |                         |             |
|--|-------------------------|-------------|
| PLEASE CHANGE THE ARTICLE II; PRINCIPAL AND MAILING ADDRESS;   |                         |             |
| PLEASE CHANGE THE ARTICLE V; REGISTERED AGENT ADDRESS  |                         | -           |
| PLEASE CHANGE THE ARTICLE IV; INCORPORATOR ADDRESS   |                         |             |
| PLEASE CHANGE THE ARTICLE VII; OFFICER AND DIRECTOR ADDRESS.   |                         |             |
| NEW ADDRESS: 2441 NW 93RD SUITE 104-A  | ,                       |             |
| DORAL, FL 33172  |                         |             |
|  |                         |             |
|  |                         |             |
|  |                         |             |
|  |                         |             |
| ·  |                         |             |
|  |                         |             |
|  |                         |             |
|  | $\overline{\Sigma}_{C}$ |             |
|  | <u> </u>                |             |
|  | làss                    | ¥ 19        |
| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,                                   |                         | )<br>}<br>  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)             | :ن ⊶                    |             |
|  | ORID.                   | <u> </u>    |
|  | V/D                     |             |
|  |                         | <del></del> |
|  |                         |             |
|  |                         |             |
|  |                         |             |
|  |                         |             |
|  |                         |             |

| 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)   | _                         |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.                               | will not be listed as the |
| Adoption of Amendment(s) ( <u>CHECK ONE</u> )  |                           |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.   |                           |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):   |                           |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  |                           |
| by   |                           |
| (voting group)   |                           |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  |                           |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   |                           |
| 6/14/2019<br>Dated   |                           |
| Signature  | -                         |
| (By a director, president or other officer—if directors or officers have not been—selected, by an incorporator—if in the hands of a receiver, trustee, or other count appointed fiduciary by that tiduciary) | - T                       |
| ANTONIO MARCOS GALES   | 9                         |
| (Typed or printed name of person signing)  |                           |
| PRESIDENT  |                           |
| (Title of person signing)  | <del></del>               |