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SECRETARY OF STATE

AUG 2 3 2018

T. LETTERM

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MM LOPEZ INC				
DOCUMENT NUMB					
The enclosed Articles of	The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all corres	pondence concerning this ma	atter to the following:			
	MARIO LOPEZ NUNEZ				
•		Name of Contact Perso	n		
	MM LOPEZ INC				
-		Firm/ Company	•		
	3348 LAKE WORTH ROAL	)			
-	• • • • • • • • • • • • • • • • • • • •	Address			
	LAKE WORTH FL 33461				
-		City/ State and Zip Cod	ę		
<del></del>	E-mail address: (to be u	sed for future annual report	notification)		
	D man and osc. (10 be a	sea for factore annual report	nomemony		
For further information	concerning this matter, pleas	se call:			
	,				
MARIO LOPEZ NUNEZ		561 at (	291-5184		
Name o	AARIO LOPEZ NUNEZ  at (561 ) 291-5184  Name of Contact Person  Area Code & Daytime Telephone N				
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
	_	,			
\$35 Filling Fee	□\$43.75 Fiting 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		Street Address Amendment Section			
	ion of Corporations	Division of Corporations			
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle					

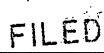
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

Articles of Incorporation of

MM LOPEZ INC

(Name of Corporation as currently filed w



(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
P19000032120	2018 日本 日 16 38		
(Document Number	of Corporation (if known) SECRETARY OF STAVE		
(Document Number Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
	The new		
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	5238 ERIKA PL		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	GREENACRES FL 33463		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5238 ERIKA PL		
	GREENACRES FL 33463		
D. If amending the registered agent and/or registered office ad-			
new registered agent and/or the new registered office addre	<u>ss:</u>		
Name of New Registered Agent			
(Florida )	street address)		
	rect data enty		
New Registered Office Address:	Florida		
	(Zip Code)		
New Registered Agent's Signature, if changing Registered Ager	nt:		
I hereby accept the appointment as registered agent. I am familian			
Simultan of Man	Registered Agent if changing		
Ngnature of New	REVISIETEA ARENI. II CHANRING		

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>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add	<del></del>		
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damara			

. If amending or adding additi (Attach additional sheets, if nee	essary). (Be speci	fic)			
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16					
If an amendment provides fo provisions for implementing	the amendment if	assification, or ca	incellation of issi	ued snares,	
(if not applicable, indicat	e N/A)	not contained in	the amendment	usen.	
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	08/15/2019	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
	715/2019	
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will Department of State's records.	Il not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	,
08/15/20 Dated	19	
S: 1		
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	_
	MARIO LOPEZ NUNEZ	
	(Typed or printed name of person signing)	
	OWNER	
	(Title of person signing)	······································