P19000075174

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COVER LETTER

TO: Amendment Section

Division of Corporations MSG CONSTRUCCIONES INTERNATIONAL CORP NAME OF CORPORATION: P19000075174 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: KATEHRINE JANJI CHAMI Name of Contact Person MSG CONSTRUCCIONES INTERNATIONAL CORP Firm/ Company 7655 SW 153rd CT 201 Address **MIAMI FL 33193** City/ State and Zip Code JACP2002@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: KATEHRINE JANJI Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

MSG CONSTRUCCIONES INTERNATIONAL CORP

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name of Corporati	on as currently filed with the Flori	da Dept. of State)	
(Docum	ment Number of Corporation (if know	vn)	
Pursuant to the provisions of section 607,1006, Floridates Articles of Incorporation:	a Statutes, this Florida Profit Corpor	ration adopts the follo	owing amendment(s) to
A. If amending name, enter the new name of the co	orporation:		
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A professional corpor		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADI			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or register new registered agent and/or the new registered		the name of the	<u>د</u> .
Name of New Registered Agent			
 -	(Florida street address)		
New Registered Office Address:	(City)	Florida	Zip Code)
	•	·	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<u>tistered Agent:</u> I am familiar with and accept the ob	ligations of the positi	on.
Signe	ature of New Registered Agent, if cha	ınging	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, as address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

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 = Chic 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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	one <u>s</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	CEO		FRANCO J. SANCHEZ	9591 FONTAINEBLEAU BLVD APT 320
X Add				MIAMI FLORIDA 33172
Remove				
2) Change		_		
Add				
Remove Change		-		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6)Change		_		
Add				
Remove				

	r adding additional Arti- nal sheets, if necessary).		<u>1.1.5. 11.00.1.00.1.</u>		
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lf un amande	ent provides for an exch	anas realestiGest	ion ar concellatio	- oftwared at	
provisions fo	r implementing the amer	adge, reclassificat adment if not cont	ained in the amen	dment itself:	
(if not ap	plicable, indicate N/A)				
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The date of each amendment(s) a	loption:	, if other than t
fate this document was signed. 09/2	5/2020	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amend	ment file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filin partment of State's records.	g requirements, this date will not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors v	vithout shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes c flicient for approval.	east for the amendment(s)
	roved by the shareholders through voting groups each voting group entitled to vote separately on	
"The number of votes cast	for the amendment(s) was/were sufficient for app	proval
by		"
	(voting group)	
09/25/ 2 020 Dated		
Signatur		
(BIJA d	rector, president or other officer – if directors or I, by an incorporator – if in the hands of a receive	officers have not been
appoint	ed fiduciary by that fiduciary)	ir. trustee, or other court
	KATEHRINE JANJI CHAMI	
	(Typed or printed name of person signature) (Typed or printed name of person signature)	ning)

(Title of person signing)