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SECRETARY OF STATE
TALLAHASSEE, FL

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	MJA 800 GR	OUP CORP.				
DOCUMENT NUMBER:	P20000009061					
The enclosed Articles of Amenda	nent and fee are su	ibmitted for filing.				
Please return all correspondence	concerning this ma	atter to the following:				
		CLARA RIVADENEIR	A			
		Name of Contact Perso	on			
	RIVADENEIRA AND ASSOCIATES INC					
	Firm/ Company					
	2742 SW 8TH STREET SUITE 201					
	Address					
	MIAMI FLORIDA 33135					
		City/ State and Zip Coc	le			
		rivagatenet@gmail.com				
E-ma	l address: (to be u	sed for future annual repor	t notification)			
For further information concerning	ng this matter, plea	se call:				
CLARA RIVADENEIRA		at (	6432248			
Name of Contact	Person		ode & Daytime Telephone Number			
Enclosed is a check for the follow	ving amount made	payable to the Florida Dep	partment of State:			
	3.75 Filing Fee & tificate 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 Addro Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Ameno Division The C	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation of

FILED

	MJA 800 GROUI	MJA 800 GROUP CORP.		PH 12: 59
(Name of C	Corporation as currently	filed with the Florida De	pt. of State)	
	P20000009061		SECRETARY	OF STATE SSEE, FL
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.100 ts Articles of Incorporation:	06, Florida Statutes, this F	lorida Profit Corporation	adopts the followin	g amendment(s)
A. If amending name, enter the new name	of the corporation:			
				The new
name must be distinguishable and contain the 'Inc.," or Co." or the designation "Corp 'chartered," "professional association," or	o," "Inc." or "Co". A	ompany," or "incorporated professional corporation	" or the abbreviation name must contai	n "Corn "
3. Enter new principal office address, if a Principal office address <u>MUST BE A STRI</u>				<del></del>
Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)	ole: FICE BOX)	445 E Okeechobee Rd		
		Hialeah Florida 33010		<u>-</u>
			<del></del>	
<ol> <li>If amending the registered agent and/onew registered agent and/or the new re</li> </ol>	r registered office address	ss in Florida, enter the na	me of the	
Name of New Registered Agent	gistered office address.			
			- <u>-</u> -	-
_	(Florida stree	n address)		-
New Registered Office Address:			. Florida	
	(0	Tity)	Zip (	Code)
	ξ(	лиу)	(Zip C	.ode)
New Registered Agent's Signature, if change	ging Registered Agents			
hereby accept the appointment as registered	l agent. – I am familiar wi	th and accept the obligation	ns of the position.	
-	Signature of New Par	gistered Agent, if changing	<del>- ·</del>	
	organiane of New Reg	astereu Agent, ij changing		

Check if applicable

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

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 Do	<u>)e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Su	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		 
Add				
Remove				
2) Change	-	_		 
Add				
Remove 3) Change	•	_		
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4) Change		_		
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5) Change		_		
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6) Change		_	<del></del>	
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	icles, enter change(s) l (Be specific)			
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The date of each amendment(s) adoption: _ date this document was signed.	May 13, 2021	, if other than the
Effective date <u>if applicable</u> :	May 13, 2021 (no more than 90 days after amendment)	file date)
Note: If the date inserted in this block does a document's effective date on the Department of	not meet the applicable statutory filing req of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s) (Cl	HECK ONE)	
☑ The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors withou	nt shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		or the amendment(s)
The amendment(s) was/were approved by the must be separately provided for each voting. "The number of votes cast for the amendment."		nendment(s):
by	ting group)	
selected, by an inc	sident or other officer – if directors or office of porator – if in the hands of a receiver, trusy by that fiduciary)	ers have not been stee, or other court
	CARLOS FERNANDEZ	
	(Typed or printed name of person signing)	
Preside	nt and Registered Agent	
	(Title of person signing)	

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