P21000012799

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Special Instructions	s to Filing Officer.
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COVER LETTER

TO: Amendment Section Division of Corporations

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AME OF CORPORATION: Muzie Coco	
осимент number: <u>921000012799</u>	
he enclosed Articles of Amendment and fee are submitted for filing.	
lease return all correspondence concerning this matter to the following:	
Michael Muzic Name of Contact Person	
M.C. Muzic Corp.	
Firm/ Company	
150 South Pine Island Road, Suite 331	
Plantation, FL 33324 City/ State and Zip Code	
E-mail address: (to be used for future chnual report notification)	.]
or further information concerning this matter, please call:	
Name of Contact Person at (917) 374-9374 Area Code & Daytime Telephone Number	} t
iclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & S\$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

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Cornoration as currently	filed with the Florida Dept. of State)
Muzie Corp. 921000012	··· ·····
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	• • •
A. If amending name, enter the new name of the corporation:	
M.C Muzic Corp.	The new
name must be distinguishable and contain the word "corporation," "co". "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	150 South Pine Island Rd Swite 331
	Plantation, FL 33324
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	150 South Pine Iskad Rd
	Plantation FL 33324
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the
Name of New Registered Agent Mozic LLC	N 12
150 South Pro	e Iskal Road Suite 380
New Registered Office Address: Plantation	City) , Florida 33324 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.
Signature of New Rev	zistered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (1!) (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:

<u>X</u> Change	PT Joh	n Doe	
X Remove	<u>V</u> <u>Mik</u>	se Jones	
_X Add	<u>SV</u> <u>Sall</u>	y.Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I) <pre>Change</pre>	<u> </u>	Michael C. Muzic	150 South Pine Island
Add			Rad Suite 300
Remove			Plantation, FL 33324
2) Change	TREA	Celenia Muzic	150 South Pine Island
Add			Bood Svite 300
Remove 3) Change			Plantation, FL 33324
Add			
Remove			
4) Change	 -		
Add			
Remove			
5) Change	<u> </u>		
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)			
				
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If an amendment provides for an excha	inge, reclassificatio	n, or cancellatio	n of issued shar	res.
provisions for implementing the amen (if not applicable, indicate N/A)	dment if not contai	ned in the amen	dment itself:	
· 				
				
				

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The date of each amendment(s) adoption: 18135 date this document was signed.	, if other than the
Effective date if applicable: 1825	
(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 wild document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	i shareholder
☐ 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 east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated	
Signature (By adirector, 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 court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
Peace A and	
(Title of person signing)	