P990000 18241

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COL	RPORATION: Miami Manageme	ent Group, Inc.						
DOCUMENT N	TUMBER:							
The enclosed Ar	ticles of Amendment and fee are su	ubmitted for fili	ng.					
Please return all	correspondence concerning this ma	itter to the folio	wing:					
	Beth Lazar, Esq.							
		Name of Co	ontact Perso	n				
	Therrel Baisden, LLP							
		Firm/ (Company	 				
	One South East Third Avenue, Suite 2950							
		Ad	dress					
	Miami, FL 33131							
		City/ State a	and Zip Cod	e				
	blazar@therrelbaisden.com							
-	E-mail address; (to be us	sed for future a	nnual report	notification)				
For further inforr Beth M. Lazar, E	nation concerning this matter, pleases	se call:	305	3715758				
N	ame of Contact Person		Area Co	de & Daytime Telephone Number				
Enclosed is a che	ck for the following amount made	payable to the I	Florida Depa	artment of State:				
S35 Filing Fo	ee ■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fil Certified ((Additiona enclosed)	Сору	□\$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 Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

Miami Management Group, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P99000078241 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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, 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	PD	Tony Forte	18377 SW 154th Street
Add X Remove			Miami, FL 33187
2) Change	VP	Tony Forte	18377 SW 154th Street
Add			Miami, FL 33187
X Remove	PD	Evette Forte	18377 SW 154th Street
3) Change		Evene Force	Miami, FL 33187
Add			
4) Change	VPD	Gabriela Forte	18377 SW 154th Street
XAdd			Miami, FL 33187
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
-	
 	
I an amendment provides for an exch provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	The state of the s
	· ·

The date of each amendment(s) adoption:	, 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 will n document's effective date on the Department of State's records.	ot 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)	•
(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.	
Dated Oct 3 2019	
Signature Circle Forti	
(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 court appointed fiduciary by that fiduciary)	
Evette Forte	
(Typed or printed name of person signing)	
Personal Representative	
(Title of person signing)	