## P13000088041

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SECRETARY OF STATE

FEB 1 0 2014 C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section

Division of Corpo	rations		
NAME OF CORPOR	M2Brands 1 li	nc.	
DOCUMENT NUMB	P13000088041		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Annabel Garcia		
•	M2Brands 1 Inc.	Name of Contact Perso	n
•	20016 nw 85 avenue	Firm/ Company	
	Hialeah, fl 33015	Address	
		City/ State and Zip Cod	e
m2b	randsinc@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Annabel Garcia		<b>786</b>	518- 1790
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	■\$43.75 Filing 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)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Flo	rida Dept. of State)
(Document Number of Corporation (if I	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida 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 "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	15937 NW 77 Place
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	15937 NW 77 Place Miamilaus, FL 33016
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 new registered agent and/or the new registered office address:  Maribel Garcia  Name of New Registered Agent	ss in Florida, enter the name of the
15937 NW - (Florida stree	17 place
• • •	
New Registered Office Address: MIAMI Lale S (City)	Florida 33014 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I amfamiliar with a signature of New Registered Agent.	

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: XChange	<u>PT</u>	John Do	<u>)e</u>		
X Remove	<u>V</u>	Mike Jones			
X Add	SY	Sally Si	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address	
1) Change	P		Maribel Garcia	15937 nw mplace	
Add				15937 nw MPlace Miami Lavas, fl 33011	
Remove					
2) Change					
∧dd					
Remove					
3) Change		_			
Add Remove					
4) Change		_			
Add				AND	
Remove				EASS5	
5) Change		_			
Add				==:	
Remove				TE NOA	
6) Change		_			
Add					
Domovo					

If amending or adding additional Artic (Attach additional sheets, if necessary).	
· ·	
If an amendment provides for an exchorousions for implementing the ameroif (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were aby the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
12/5/1 Dated		
g:	anabel Jaria	
(By sched	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Annabel Garcia	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	
	TALLAHA	2n 14 FEB

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ECRETARY OF STATE

LLAHASSEE, FLORIDA