P11000064244

· (Re	questor's Name)	
C 1-	,,	
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
/Bu	isiness Entity Nar	me)
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· (Do	ocument Number)	
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SEP 1 2 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: M.C.B.SER	VICES, INC	
DOCUMENT NUME	BER: P1100006424	4	
	of Amendment and fee are sub		
Please return all corres	spondence concerning this mat	ter to the following:	
	GUSTAVO MON	ΓEALEGRE	
		Name of Contact Person	I
	JCEROCK BUSIN	NESS SOLUTIO	NS INC
		Firm/ Company	
	2863 SW 29TH C	OURT	
		Address	
	MIAMI, FL 33155		
		City/ State and Zip Code	
gm	ontealegre@jcero	ck.org	
<u> </u>		ed for future annual report	notification)
For further information	n concerning this matter, pleas	e call:	
Gustavo Mor	ntealegre	at (786	484-6827
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	ertment 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)
Amo Divi P.O	cling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

P11000064244	currently filed with the Flor	ide Dent of State)	
		iua Dept. of State	3 14
(Dogument			
(Document	t Number of Corporation (if k	nown)	TO SEP 10
Pursuant to the provisions of section 607.1 as Articles of Incorporation:	006, Florida Statutes, this Flo	orida Profit Corporation	Sit Dem
a. If amending name, enter the new na	me of the corporation:		
			The
name must be distinguishable and conti "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associated. B. Enter new principal office address, in a principal office address MUST BE A STATE A POST OF A STATE A	ation "Corp," "Inc," or "Co ion," or the abbreviation "P.A if applicable: IREET ADDRESS)	o". A professional corp	rporated" or the abbrevia oration name must contain
). If amending the registered agent and new registered agent and/or the new		·	name of the
		,, ,, ,, ,,	
Name of New Registered Agent	1206 SW 2 ST		
Name of New Registered Agent	1206 SW 2 ST	addraga)	-
Name of New Registered Agent New Registered Office Address:	1206 SW 2 ST (Florida street	,	

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	PT	CAROLYN BONILLA	1206 SW 2 ST
Add		,	MIAMI, FL 33135
X Remove			
2) X Change	VP	MARIA CASTELLANOS	1206 SW 2 ST
Add			MIAMI, FL 33135
Remove			
3) Change	PT	MARIA CASTELLANOS	1206 SW 2 ST
X_Add			MIAMI, FL 33135
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
1/1/		
N/A	·	
/'		
		<u> </u>
		-
an amendment provides for an exch	ange, reclassification, or cancellation of issue	d shares.
rovisions for implementing the ame	ndment if not contained in the amendment its	elf:
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		
(if not applicable, indicate N/A)		

The date of each amendment(s) a	doption: 7/31/2012
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	lopted by the board of directors without shareholder action and shareholder lopted by the incorporators without shareholder action and shareholder
Dated_ 7/31/2 Signature	director, president or other officer – if directors or officers have not been
select	ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	MARIA CASTELLANOS
	(Typed or printed name of person signing)
	VICE PRESIDENT
	(Title of person signing)