# P14000057361

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MPD GLOBAL MAINTENANCE INC.

DOCUMENT NUMBER: P14000057361

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAIKER MADRIZ

Name of Contact Person

MPD GLOBAL MAINTENANCE INC.

Firm/ Company

967 VINERIDGE RUN APT 206

Address

**ALTAMONTE SPRINGS, FL 32714** 

City/ State and Zip Code

MPDGLOBAL@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAIKER MADRIZ

...407

2553178

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

**Mailing Address** 

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### **Articles of Amendment Articles of Incorporation**

## FILED.

#### MPD GLOBAL MAINTENANCE INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P14000057361

dment(s) to

(Document Number	of Corporation (if known)	SEUTE HASSEE, FLOF
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this Florida Profit Con	poration looks the following amend
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Coi word "chartered," "professional association," or th	rp." "Inc," or "Co". A professio	The or "incorporated" or the abbrevial nal corporation name must contain
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>	
D. If amending the registered agent and/or regist new registered agent and/or the new registere		ter the name of the
Name of New Registered Agent		<del></del>
	(Florida street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Office Address:  New Registered Agent's Signature, if changing R.  I hereby accept the appointment as registered agent.	egistered Agent:	(Zip Code)

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	$\underline{\mathbf{v}}$	Mike Jones			
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address		
1) Change	D	CARLOS ALVAREZ	529 TERRACEVIEW COV		
Add			#207 ALTAMONTE SPGS		
Remove			FL 32714		
2) Change	D	MARIA SCHURMANN	967 VINERIDGE RUN APT		
Add			206 ALTAMONTE SPGS		
Remove			FL 32714		
3) Change	D	SOLMARYELI MORALES	937 VINERIDGE RUN APT		
Add			205 ALTAMONTE SPGS		
Remove			FL 32714		
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

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If an amendment pr provisions for impl (if not applicable	ovides for an exchementing the ame	iange, reclassifi ndment if not c	cation, or canc	ellation of issued amendment itse	l shares, lf:	
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The date of each amendment(s) adoption: 12/16/2014	, if other than the
date this document was signed.	
Effective date if applicable: 12/18/2014	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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"	
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_12/16/2014 Signature	
(By a director, president) 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)	_
MAIKER MADRIZ	_
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	