Page 1 of 5

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000435425 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

from:

Account Name : API PROCESSING Account Number : I20110000069 Phone : (954)567-0013 Fax Number : (954)567-3401

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: kathy@apiprocessing.com

59

COR AMND/RESTATE/CORRECT OR O/D RESIGN MID-FLORIDA CONTROLS, INC.

t along the said one contributions to the design of the same than the said of	
Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

Help

H23000435425 3 Page 2 of 5

Articles of Amendment to Articles of Incorporation of

	MID-FLORIDA CO	TROLS, INC.	,
(Name o		filed with the Florida Dept. of State)
	P1700007874	3	
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006; Florida Statutes, this P	lorida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		1775.
nams must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	lorp," "Inc," or "Co". A	mpany," or "incorporated" or the ab- professional corporation name mus-	The new breviation "Corp.," t contain the word
B. Enter new principal office address, if applicables (Principal office address MUST RE A STREET ADDRESS)		421 SOUTH ALDERWOOD STRE	ET
		WINTER SPRINGS, FL 32708	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	cable: OFFICE BOX)	421 SOUTH ALDERWOOD STRE	· -
(Marring and one last) po to a control of the		WINTER SPRINGS, FL 32708	
D. If amending the registered agent an new registered agent and/or the ner	d/or registered office address:	ess in Florida, enter the name of the	
Name of New Registered Agent	BRETT.A. BOURGEOIS		<u> </u>
	421 SOUTH ALDERWOO	DSTREET	÷. (
	(Florida stre	et address)	
New Registered Office Address:	WINTER SPRINGS	Plorida_	32708
	(Cipy)	(Zip Code)
N	handun Wastekonedi Amark		
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	ered agent. I am familiar w	ith and accept the obligations of the p	osition.
B#3~~	<u>ب</u>		
	Signature of New Re	gistered Agent, if changing	******
Check if applicable The amondment(s) is/are being filed p	ursusat to s. 607.9120 (11) (c	s), 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: X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u> s
1) Change	PT	CHAN CLEMONS	8131 BAY LAKE ROAD
Add			GROVELAND, FL 34736
XX Remove			
2) Change	VPS	LOURDES CLEMONS	8131 BAY LAKE ROAD
Add			GROVELAND, FL 34736
XX Remove	P	BRETT ALLAN BOURGEOIS	421 SOUTH ALDERWOOD ST
3) XX Change	<u>r</u>	BRETT ALLAN BOURGEOIS	WINTER SPRINGS, FL 32708
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary). (Be specific)	
	
	· · · · · · · · · · · · · · · · · · ·
n amendment provides for an exchange, reclassification, or cancell	ation of issued shares,
ovisions for implementing the amendment if not contained in the at (If not applicable, indicate N/A)	mendment itself:
() Not applicable, Marcale	
	-
	-
	· · · · · · · · · · · · · · · · · · ·

H23000435425 3 Page 5 of 5

The date of eac	ch amendment(s) adoption:	, if other than the
Effective date i		file data)
	(no more than yo acys after amenament	file units
Note: If the da document's offe	ate inserted in this block does not meet the applicable statutory filing requestive date on the Department of State's records.	uirements, this date will not be listed as the
Adoption of An	mendment(s) (CHECK ONE)	
The amendm	nent(s) was/were adopted by the incorporators, or board of directors without required.	ut shareholder action and shareholder
☐.The amendm	nent(s) was/were adopted by the shareholders. The number of votes cast fi sholders was/were sufficient for approval.	or the amendment(4)
The amendm	nent(s) was/were approved by the shareholders through voting groups. The arctely provided for each voting group entitled to vote separately on the a	a following statement mendmant(s):
"The n	number of votes cast for the amendment(s) was/were sufficient for approva	ıl
by		
٠,	(vating group)	· .
	D 04 B033	₹.
	Dated_Dec 21, 2023	ro
	Dated Dec 21, 2023 Signature EAS	··-
	(By a director, president or other officer – if directors or office selected, by an incorporator – if in the hands of a receiver, to appointed fiduciary by that fiduciary)	usice, or other court ()
	BRETT ALLAN BOURGEOI	īS
	(Typed or printed name of person signing))
	PRESIDENT	
	(Title of person signing)	