P100000 73486

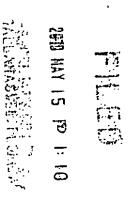
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COVER LETTER

TO: Amendment Section Division of Corporations The Meridian Organization, Inc. NAME OF CORPORATION: P10000073486 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Leslie Gillis Name of Contact Person Meridian Organization Firm/ Company 14312 SW 154 Court Address Miami, FL 33196 City/ State and Zip Code Leslie.G@Radshield.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 305 648-1139 Leslie Gillis Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee ☐ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

(Name of Corporation as	currently filed with the Florida Dept. of State)
P10000073486 - The Meridian Organization, Inc.	2879 HAY 15 PP 1: 10
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corpora	ation:
N/A	The new
	orporation," "company," or "incorporated" or the abbreviation inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	\(\cdot \cdot \cdo
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
N/A Name of New Registered Agent	
	Florida street address)
New Registered Office Address:	. Florida
<u>New Regimerea Office Maaress</u> .	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am	
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.

Mike Jones, V as Remove Example:	, and Sal	ly Smith, SV	' as an Add.			
X Change	PT	John Doe				
X Remove	<u>V</u>	Mike Jone	<u>'S</u>			
X Add	<u>sv</u>	Sally Smit	<u>h</u>			
Type of Action (Check One) 1) Change	<u>Title</u> N/A	<u>N</u>	lame		<u>Addres</u> s	
Add		- -			 	
Remove						
2) Change				<u></u>	 	
Add			٠			
Remove						
3) Change					 	
Add					<u> </u>	
Remove						
4) Change					 	
Add					 	
Remove						
5) Change		_ -	<u> </u>	1	 	
Add						
Remove						
6) Change					 	
Add						
Ramova						

(Attach additional sheets, if necessary). (Be specific)	ess) nere.
Article III- PURPOSE	
The Corporation is organized for the purpose of transacting any and all law	ful business under the laws of the State of Florida.
F. If an amendment provides for an exchange, reclassifica provisions for implementing the amendment if not cor	tion, or cancellation of issued shares, tained in the amendment itself:
(if not applicable, indicate N/A) N/A	

• •		
The date of each amendment(s) add	option:	, if other than th
date this document was signed. May	13, 2019	
Effective date if applicable:		
<u></u>	(no more th	an 90 days after amendment file date)
Note: If the date inserted in this bloocument's effective date on the Dep		pplicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adop by the shareholders was/were suff		The number of votes cast for the amendment(s)
		s through voting groups. The following statement d to vote separately on the amendment(s):
"The number of votes cast for	or the amendment(s) was	/were sufficient for approval
by		."
· · · · · · · · · · · · · · · · · · ·	(voting group)	
action was not required.	·	tors without shareholder action and shareholder without shareholder action and shareholder
May 13, 20	19 🔥	
Dated	\sim //	
	(-8/	
selected.		officer – if directors or officers have not been in the hands of a receiver, trustee, or other court lary)
_		nted name of person signing)
	Director	
-	T)	itle of person signing)

Page 4 of 4