P22000009013

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Contillad Conics Contillation of Status |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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2022 AUG 15 PM 3: 16

COVER LETTER

| TO: Amendment Secti Division of Corpo | | ٠ | • |
|--|---|---|--|
| NAME OF CORPOR | ATION: MDL S ER: P2200 | hipping cor | P |
| DOCUMENT NUMB | ER: P2200 | 0009613 | |
| The enclosed Articles of | of Amendment and fee are su | bmitted for filing. | |
| Please return all corresp | pondence concerning this ma | tter to the following: | |
| - - | MDL Ship 7175 NW 1 | Caro Peque Name of Contact Persor Pping Corp Him/Company 74Th ST. A Address PL 33015 City/ State and Zip Code | pt 202 |
| - | CARO Lidi E-mail address: (to be us | ae @ gmail sed for future annual report | notification) |
| For further information | concerning this matter, pleas | se call: | |
| Lidia E. | Caro Peque | 10 at (521 | 245-8864 de & Daytime Telephone Number |
| | the following amount made | | |
| S35 Filing Fee | - | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Ame Divis | ing Address indment Section ition of Corporations Box 6327 | Amend Divisio | Address ment Section n of Corporations entre of Tallahassee |

Tallahassee, FL 32314

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

| MDL | Shipping | Corp | filed with the Florida Dep | 2022 AUG 15 | PM 3-12 |
|---|---|-------------------------|---|------------------------------------|-------------------|
| | (Name of Corp | oration as currently | filed with the Florida Dep | t. of State) | 0.12 |
| P22 0000 | 09013 | | | TALLAHAS | Sam in |
| | 1) | Document Number of | Corporation (if known) | | A 1- 1. (|
| Pursuant to the provisi its Articles of Incorpor | | lorida Statutes, this F | lorida Profit Corporation a | dopts the following | g amendment(s) to |
| A. If amending name | e, enter the new name of | the corporation: | | | |
| | | | | | The new |
| "Inc.," or Co.," or t | | "Inc," or "Co". A | ompany," or "incorporated" professional corporation is | | |
| | oal office address, if appli ess <u>MUST BE A STREET</u> | | | | |
| | | | | ·································· | |
| | | | | | |
| | og address, if applicable: MAY BE A POST OFFIC | <u>(E BOX</u>) | | | - |
| | | | | | |
| | | | | | |
| | egistered agent and/or re ent and/or the new regist | | ess in Florida, enter the na | me of the | |
| Name of New | Registered Agent | | | | |
| | | | | | |
| | . | (Florida stre | et address) | | • |
| <u>New Registers</u> | ed Office Address: | | | , Florida | |
| | | (| City) | (Zip C | inle) |
| | | | | | |
| New Registered Ager | it's Signature, if changin | o Revistered Avent: | | | |
| I hereby accept the ap | pointment as registered ag | ent. – Lam familiar w | ith and accept the obligation | is of the position. | |
| | | | | | |
| | | | | | |
| | | Signature of New Re | gistered Agent, if changing | | |

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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)

Example:

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 Doc 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.

| X Change | PT | John Doe | |
|----------------------------|-----------|---------------------|-------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | Address |
| 1) Change | <u>P</u> | Carlos Luis Mejiap. | 7175 NW 199th St. |
| Add | | · | Hialeah, FL 33015 |
| _X_ Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | <u> </u> | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 51 Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| ach additional sheets, if necessary). (Be specific) | |
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| in amendment provides for an exchange, reclassification, or cancellat | ion of issued shares, |
| ovisions for implementing the amendment if not contained in the am | endment itself: |
| (if not applicable, indicate N/A) | |
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| The date of each amendment(s) ac date this document was signed. | loption: | , if other than |
|--|--|---|
| Effective date if applicable: | | |
| | (no more than 90 days after amendmen | t file date) |
| Note: If the date inserted in this b document's effective date on the De | lock does not meet the applicable statutory filing repartment of State's records. | quirements, this date will not be listed as |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ado action was not required. | pted by the incorporators, or board of directors with | out shareholder action and shareholder |
| ☐ The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes east fficient for approval. | for the amendment(s) |
| must be separately provided for | roved by the shareholders through voting groups. The each voting group entitled to vote separately on the of for the amendment(s) was/were sufficient for approv | amendment(s): |
| | | STALL AND I |
| | (voting group) | Aug II |
| Dated Avg | 12th, 2022 | SSS PH 3: |
| (By a di selected | rector, president or other officer—if directors or officel, by an incorporator—if in the hands of a receiver, tred fiduciary by that fiduciary) | |
| | (Typed or printed name of person signing | |
| | (Typed or printed name of person signing | .) |
| | (Title of person signing) | |

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