717215

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700305005767

10/27/17--01002--019 **35.00

M 001 27 P 12: 59

1:0V 0 1 2017 T. LEMBEUX A

Articles of Amendment Articles of Incorporation of

	MM/UM	ASSOCIATION	IN
(Name of Corporation as cu	rrently filed with the l	Florida Dept. of State)	
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not	For Profit Corporation adopts the	following
A. If amending name, enter the new name of the corp	oration:		
name must be distinguishable and contain the word "cor" "Company" or "Co." may not be used in the name.	poration" or "incorpor	ated" or the abbreviation "Corp."	_The new or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>)	<u>ESS</u>)	V/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<i>N</i> /	A	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off Name of New Registered Agent:		ida, enter the name of the	
New Registered Office Address:	/	(Florida street address)	
	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. La		1	
	Signature of New Re	egistered Agent, if changing	3 ; 50 38 9 9 812 7
	Page 1 of 4	P # 00	

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 X Remove X Add	<u>V</u> <u>Mik</u>	t Doe e Jones v Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	I	LOIS ANNE NEL	I DI GOLDEIU ISLES DR PHI-HALLANDALE
Add			REACH FL 33009
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
•	
	
	
	
/	
(

Page 3 of 4

. The date of each amendment(s) adopti	ion:	9/22/17	, if other than the
date this document was signed.		7. (
Effective date if applicable:		9/22/17	
Encerve date it applicable.	(no more than 90 days a	fier amendment file date)	
Note: If the date inserted in this block d document's effective date on the Departs		statutory filing requirements, this o	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the	number of votes cast for the amend	ment(s)
There are no members or members adopted by the board of directors.	entitled to vote on the amer	ndment(s). The amendment(s) was/	were
Dated	10/25/17		
Signature	yllis Swais		
have not been so		ard, president or other officer-it dir – if in the hands of a receiver, trustociary)	
	PHYLLIS SI	WARLS and name of person signing)	
	Secretar	e of person signing)	
	(1111	c,7/1 person arguing)	