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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Mayoki Panzacola Indians, Inc.
DOCUMENT NUMBER: 740245
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Marking Di Santo (Name of Contact Person)
(Indiae of Conduct Felson)
(Firm/ Company)
4560 Bohemia Drive (Address)
Pensacola, FL 32504
(City/ State and Zip Code)
macanari 771 a hotmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Marlana Di Santo at 850 554-3668
(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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed) 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

to

Articles of Incorporation

of

Maudki Panz	iacola Indian	ns Inc.	
(Name of Corporation as c			
カイクン	145		
(Document	Number of Corporation	n (if known)	
Pursuant to the provisions of section 617.1006, Florida 5 amendment(s) to its Articles of Incorporation:	Statutes. this <i>Florida N</i>	Not For Profit Corporation adopts the fo	Howing
A. If amending name, enter the new name of the cor	poration:		
Mayokis of P	anzacola Tr	√. <i>1</i>	he new
name must be distinguishable and contain the word "co." "Company" or "Co." may not be used in the name.	rporation" or "Incorp	orated" or the abbreviation "Corp." or	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0		
D. If amending the registered agent and/or registere new registered agent and/or the new registered of Name of New Registered Agent:		orida, enter the name of the	
		(Florida street address)	
New Registered Office Address:		(Floren Street and ess)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I	stered Agent: am familiar with and a	accept the obligations of the position.	
	Signature of New Page 1 of 4	Registered Agent, if changin	7 7 1
	1 age 1 01 4	20 SS	4 ?

The date of each amendment(s) adoption:late this document was signed.	, if other than the
Effective date <u>if applicable</u> :	than 90 days after amendment file date)
·	t the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK	<u>(ONE</u>)
The amendment(s) was/were adopted by the me was/were sufficient for approval.	embers and the number of votes cast for the amendment(s)
There are no members or members entitled to veradopted by the board of directors.	ote on the amendment(s). The amendment(s) was/were
Dated 4/13/19	
Signature Malaca Di	Santo
· · · · · · · · · · · · · · · · · · ·	irman of the board, president or other officer-if directors in incorporator – if in the hands of a receiver, trustee, or ary by that fiduciary)
Mar	Jana Di Sant () Typed or printed name of person signing)
Treas	Surer, Mayokis of Panzacula, Inc.