L82301

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2020 AUG 24 PM 1: 12 SECRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: <u>MAS PROL</u>	exerce Conpa	NY OF anTRAL FLORE
DOCUMENT NUMI	BER: <u>L<i>88301</i></u>		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	MAN	Name of Contact Person	
		Name of Contact Persor	1
	MAS PRODUCTION	Firm/ Company	CONTRAL THORIDA
	4601 E Moody	BIVA F2 Address	
	Bunnel	/ Hoerba =	<i>32110</i>
For further informatio	E-mail address: (to be us	se call:	
	of Contact Person	at (<u>206</u>	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made		•
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee

Tallahassee, FL 32303

Articles of Amendment

FILED.	`
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	of 2020 AUG 24 PM 1: 12
MAS TRODUCTION OMDANY	Or Goteal Floring INC
	as currently filed with the Florid FISHE TASLATES SEE, FL
182301	TALLAHASSELL
	nt Number of Corporation (if known)
ersuant to the provisions of section 607.1006, Florida St Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s
If amending name, enter the new name of the corp	poration:
	The new
ime must be distinguishable and contain the word "corp Inc.," or Co.," or the designation "Corp," "Inc." o chartered," "professional association," or the abbrevia	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word ation "P.A."
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDR</u> i	ESS)
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
Ye dim do	d office address in Florida, enten the name of the
. If amending the registered agent and/or registered new registered agent and/or the new registered off	
-	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address;	(Florida street address)

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)

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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	_S	Dappi WILBANKS	PO. BOX 1487
Add			PO. BOX 1487 BUNNELL, FLORIDA
<u></u> Remove			32110
2) Change			_
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Adđ			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

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provisions for implementing the am	hange, reclassification, endment if not containe	or cancellation of is d in the amendmen	sued shares, titself:	

The date of each amendment(late this document was signed.	s) adoption:			, if other than the
Effective date <u>if applicable</u> :	1.0	20	2020	
	(no	more tha	1030 in 90 days after amendment file	date)
Note: If the date inserted in the document's effective date on the	nis block does not me e Department of State	et the ap	plicable statutory filing require s.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK	ONE)		
The amendment(s) was/were action was not required.	adopted by the incor	porators,	or board of directors without sh	archolder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the share re sufficient for appro	holders. val.	The number of votes cast for th	e amendment(s)
☐ The amendment(s) was/were must be separately providea	: approved by the shar I for each voting group	eholders p entitled	through voting groups. The foll to vote separately on the amen	lowing statement dment(s):
"The number of votes	east for the amendmen	nt(s) was	/were sufficient for approval	
by	(voting gr			
	(voting gr	oup)		
Dated Signature	ma			
(By	a director, president of ected, by an incorpora pointed fiduciary by th	tor – if in	officer – if directors or officers has the hands of a receiver, trustee ary)	ave not been, or other court
	MA	HUW	SHEETS	
	(Typed	d or print	ed name of person signing)	
	F	lesiD	ENT	
	(Title	of person	signing)	

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