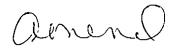
M37717

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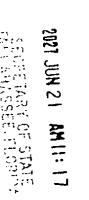
Office Use Only



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JUL 2 1 2021 A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MR. NEON INC.			
	BER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Jose L Almarales			
		Name of Contact Person	n	
	Professional Services Bookkeeping INc			
		Firm/ Company		
	736 NW 22nd Av			
		Address	 	
	Miami Fl. 33125			
		City/ State and Zip Cod	e	
		·		
	jose@professionalservicesmi			
	E-man address: (to be us	sed for future annual report	notineation)	
For further informatio	n concerning this matter, plea	se call:		
Jose L Almarales		at (<u>305</u>	642-3000	
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street	Address	
Amendment Section		Amendment Section		
•		Division of Corporations		
		Ameno Divisio The C	Iment Section	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

MR. NEON INC.	2027 JUN 21 AM (1: 1.7
(Name of Corporatio	n as augmently filed with the Elevide Dent of State)
M37717	SECUTION MEDICAL THE PROTOS DEPT. OF STATE TALL AHASSEE, FLORID:
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the cor	rporation:
	The new
	rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word diation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADD)</u>	RESS)
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u> </u>
D. If amending the registered agent and/or registere	ed office address in Florida, enter the name of the
new registered agent and/or the new registered o	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
Naw Davistanad Agant's Signatura if abanging Davis	stand Avanta
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I	am familiar with and accept the obligations of the position.
Cima	ture of New Registered Agent, if changing
Signal	are of New Negisterea Agent, if changing
Check if applicable	

 \Box 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	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	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	VP	Cheri L Carpenter	7265 N Oakmont Dr.
X Add			Miami FL 33015
Remove			
2) Change	<u> </u>	_	_
Add			
Remove Change			
Add			
Remove			
4) Change			_
Add			
Kemove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

,	
. If amending or adding	additional Articles, enter change(s) here:
(Attach additional sheets	s, if necessary). (Be specific)
	
	·
	
	
	
. If an amendment provi	ides for an exchange, reclassification, or cancellation of issued shares,
<u>provisions for implem</u> (if not applicable, t	tenting the amendment if not contained in the amendment itself:
(у на иррпсине, г	mateur 1971)
	
·-	

The date of each amendment(s) adoption:	if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file o	late)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requires Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the sufficient for approval.	amendment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amena	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
06/10/2 Dated	721	
sele	a director president or other officer – if directors or officers had cted, by an incorporator – if in the hands of a receiver, trustee, ointed fiduciary by that fiduciary)	ave not been or other court
	Gary S Carpenter	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	