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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC -1 PM 12:59

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Amend

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DEC - 4 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MINGI, INC.

DOCUMENT NUMBER: N04000006320

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUSTIN PHILIDOR, JR.

(Name of Contact Person)

MINGI, INC.

(Firm/ Company)

13742 ROYSTON BEND

(Address)

HUDSON, FLORIDA 34669

(City/ State and Zip Code)

mingikids@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUSTIN PHILIDOR, JR.

(Name of Contact Person)

at (813) 966-0051

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

Articles of Amendment
to
Articles of Incorporation
of

MINGI, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N04000006320

(Document Number of Corporation (if known))

FILED
2009 DEC -1 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Officer</u>	<u>Marc Philidor</u>	<u>30434 Tremont Drive</u> <u>Wesley Chapel, Florida 33543</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Officer</u>	<u>Sodia Thompson</u>	<u>712 West Jasmine Drive</u> <u>Lake Park, Florida 33403</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Officer</u>	<u>Tamisha Hargrove</u>	<u>4409 Bass Street</u> <u>Tampa, Florida 33617-8201</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Article XIII

Dissolution Clause

Upon the dissolution of this organization, assets shall be distributed for one or more
exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code,
or corresponding section of any future federal tax code, or shall be distributed to the
federal government, or to a state or local government for a public purpose.

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 (continued):

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Officer	Marie Acluche	7106 Lakes Divide Road Temple Terrace, Fl 33637	Remove
Officer	Jean Vixamar	30434 Tremont Drive Wesley Chapel, Fl 33543	Remove

The date of each amendment(s) adoption: October 15, 2009
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated October 15, 2009

Signature _____

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Justin Philidor, Jr.

(Typed or printed name of person signing)

President / Founder

(Title of person signing)