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EFFECTIVE DATE

AUG 2 4 2020

I ALBRITTON

COVER LETTER

Division of Corporations
NAME OF CORPORATION: MODIM MICS MICS MC
DOCUMENT NUMBER: 11900003871
DOCUMENT NUMBER: NOT TO T
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Holice Eximple
(Name of Contact Person)
MOODING HAS MICE IM
(Firm Company)
849 Michican Fre Mionii Becch 33139
J (Address)
War Proude 33839
(City/ State and Zip Code)
CHMONDO CHOIL: COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MILLI GIOING 31 805) 400-7039
(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 □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Fili
Mailing AddressStreet AddressAmendment SectionAmendment Section
Enclosed) Mailing Address Street Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Artic	les of Amendment	B.	
Article	to es of Incorporation		
EFFECTIVE DATE Article	ide hide li	(/	1/2
Name of Corporation as currently filed with the Plorida	Dent of State)	(IC)	بر ــــــ
7) KII90000	ber of Corporation (if know	n)	
presure to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For Pi</i>	rofit Corporation adopts the follo	owing
If amending name, enter the new name of the corpora	ition:		
NOODING LICE FLOW FRINKE ,	NIGS INC		new
ame must be distinguishable and contain the word "corpord Company" or "Co," may not be used in the name.	ation" or "incorporated" o	r the abbreviation "Corp." or "L	nc."
. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRESS</u>	(1)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	202 SW 144 Miami Fi	M PVI 33135	
If amending the registered agent and/or registered off new registered agent and/or the new registered office. Name of New Provinces Agent.		er the name of the	
Name of New Registered Agent:	_	<u> </u>	
New Registered Office Address:	(Florida	street address)	
		, Florida (Zip Code)	·-···
	(City)	(ZIP Code)	

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)

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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	Tradhor	Morian Smith	SHA MICHIGAN PLA MICHIGAN PROJECT 33139
Remove 2) Change Add	Total	Brinciss Mayarts	Edg in chigon AND MICHAIL BONEL 53134
Remove Change Add Remove	Socratory	Cristal Aman	
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or ac (attach additional s	dding additional A sheets, if necessary)	rticles, enter change(s) here: . (Be specific)	

	<u> </u>
	
	
The date of each amendment(s) adoption: 1700 date this document was signed.	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date of document's effective date on the Department of State's records.	will not be listed as the
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 <u>JULY 7 1070</u>
Signature WOOD Thurs
(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)
hall Evimos
(Typed or printed name of person signing)
Prosectiont
(Title of person signing)