

PD1000007488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900235849169

06/06/12--01008--007 **35.00

FILED
12 JUN -6 PM 4:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

JUN -7 2012

T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MAYPORT MAINTENANCE SERVICES INC.

DOCUMENT NUMBER: P01000007488

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

Please return all correspondence concerning this matter to the following:

MARK WARDA

Name of Contact Person

LAND TRUST SERVICE CORPORATION

Firm/ Company

PO BOX 186

Address

LAKE WALES, FL 33859

City/ State and Zip Code

MARK@WARDA.NET

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

For further information concerning this matter, please call:

MARK WARDA

Name of Contact Person

at (863)

678-0011

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
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

MAYPORT MAINTENANCE SERVICES INC.

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

P01000007488

(Document Number of Corporation (if known))

FILED
12 JUN -6 PM 4: 59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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

(Not Applicable)

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

(Not Applicable)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

(Not Applicable)

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

L.T.S.C., LLC

28 WEST PARK AVENUE

(Florida street address)

New Registered Office Address:

LAKE WALES

(City)

Florida 33853

(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.

BY Mark W. Jordan MARK JORDAN, PRESIDENT OF MAYPORT MAINTENANCE SERVICES INC.
Signature of New Registered Agent, if changing

(Attach additional sheets, if necessary)

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.

Example:

<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>
--------------	-----------	--------------------

Address

6424 PINELOCK DR
JACKSONVILLE, FL 32211

6424 PINELOCK DR
JACKSONVILLE, FL 32211

Age Group	Total (%)	Male (%)	Female (%)
18-24	15	10	20
25-34	25	20	30
35-44	20	15	25
45-54	15	10	20
55-64	10	5	15
65+	15	10	25

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

(Not Applicable)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

(Not Applicable)

The date of each amendment(s) adoption: May 11, 2012

Effective date if applicable: May 11, 2012
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated May 11, 2012

Signature MAYPORT MANAGEMENT TRUST By: Peter Pestano Trustee

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

Peter Pestano

(Typed or printed name of person signing)

TRUSTEE

(Title of person signing)