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COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPO | DRATION: M.J. Goodman Ma | nagement Co. Inc. | , , , , , , , , , , , , , , , , , , , | |
|-----------------------|--|--|--|--|
| DOCUMENT NUM | IBER: PO200023844 | | | |
| The enclosed Article | s of Amendment and fee are su | bmitted for filing. | | |
| Please return all com | espondence concerning this ma | tter to the following: | | |
| | Mary Jo Goodman | | | |
| | - | Name of Contact Person | 1 | |
| | M.J. Goodman Management | | | |
| | | Firm/ Company | | |
| | 10494 Oak Leaf St | | | |
| | | Address | | |
| | Largo Florida 33774 | | | |
| | | City/ State and Zip Code | <u> </u> | |
| | goodman1162@gmail.com | | | |
| | | sed for future annual report | notification) | |
| For further informati | on concerning this matter, pleas | se calt:at (727 | 430-0276 | |
| | e of Contact Person | at (at Co | de & Daytime Telephone Number | |
| | for the following amount made | | | |
| S35 Filing Fee | ☐S43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| | ailing Address | | Address | |
| | nendment Section | | ment Section | |
| | vision of Corporations D. Box 6327 | Division of Corporations The Centre of Tallahassee | | |
| Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 | | |

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

| M.J. | Comporation as currently filed with the Florida Dept. of State) | |
|----------|---|--|
| (Name of | Corporation as currently filed with the Florida Dept. of State) | |

PO2000023844

(Document Number of Corporation (if known)

| Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation: | tatutes, this Florida Profit Corpor | ration adopts the following amendmen |
|---|-------------------------------------|--|
| A. If amending name, enter the new name of the corp | ooration: | |
| | | The new |
| name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp," "Inc." o "chartered," "professional association," or the abbrevia | or "Co". A professional corpor | orated" or the abbreviation "Corp.," ration name must contain the word |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR) | <u>ESS</u>) | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| | | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered off | | the name of the |
| Name of New Registered Agent | | |
| | | |
| | (Florida street address) | |
| New Registered Office Address: | APPLY A | Florida (Zip Code) |
| | (City) | (Zip Code) |
| | | |
| New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a | | oligations of the position. |
| | | |
| Signatu | re of New Registered Agent, if che | unging |
| | | |

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, nam | ie, 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 | <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 | v | Robert Bruce Goodman | 10494 Oak Leaf St. |
| x Add | | | Largo, Fl. 33774 |
| Remove | | | |
| 2) Change | T | Andrew Lloyd Goodman | 10494 Oak Leaf St. |
| X Add | | | Largo, Fl. 33774 |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| iach <i>additional sheets, i</i> | dditional Articles, ente if necessary). (Be spec | cific) | | | |
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| an amendment provida | es for an exchange, rec | lassification, or can | cellation of issued s | shares, | |
| rovisions for implemen | <u>nting the amendment it</u> | f not contained in th | e amendment itself | <u>f:</u> | |
| (if not applicable, inc | dicate N/A) | | | | |
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| The date of each amendment(s) | adoption: | , if other than the |
|---|---|-----------------------------------|
| date this document was signed. | | |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the | s block does not meet the applicable statutory filing requirements, the Department of State's records. | is date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were a action was not required. | adopted by the incorporators, or board of directors without shareholder | action and shareholder |
| ☐ The amendment(s) was/were a by the shareholders was/were | adopted by the shareholders. The number of votes east for the amenda sufficient for approval. | nent(s) |
| | approved by the shareholders through voting groups. The following states of each voting group entitled to vote separately on the amendment(s): | |
| | ast for the amendment(s) was/were sufficient for approval | |
| Mary Jo Goodman | ,, | |
| <u> </u> | (voting group) | |
| 08/17/20 Dated | | |
| selec | a director, president or other officer – if directors or officers have not beted, by an incorporator – if in the hands of a receiver, trustee, or other binted fiduciary by that fiduciary) | |
| | Mary Jo Goodman | |
| | (Typed or printed name of person signing) | |
| | Mary Jo Goodman | |
| | (Title of person signing) | |