P03000047946

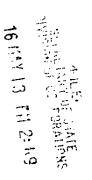
(Re	equestor's Name)	
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		COVER LETTER	
TO: Amendment Section Division of Corpor			
NAME OF CORPOR	ATION: MGQ & Associate	s, Inc.	
NAME OF CORPORA	P03000047946	<u> </u>	
DOCUMENT NUMBE	ER:		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
F	Roger Abreu		
_		Name of Contact Person	1
Ŋ	MGQ & Associates, Inc.		
_		Firm/ Company	
1	719 E Columbus Drive		
ı	Sampa, FL 33605	Address	
_		City/ State and Zip Code	•
rabreu(@mgqassociates.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Roger Abreu		at (813	877-8895
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Amen Divisi P.O. I	ng Address dment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle

Articles of Amendment to Articles of Incorporation of

6/4/3

MGQ & Associates, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) P03000047946 (Document Number of Corporation (if known) 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: 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) 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: George L Guerra Name of New Registered Agent 5505 W Gray St (Florida street address) Tampa, FL New Registered Office Address: (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)

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>y</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	P	Mario G Quevedo III	8725 Baycrest Lane
Add X Remove			Tampa, FL 33615
2) X Change	<u>P</u>	Brian K Crist	12459 Fort King Road
Add			Dade City, FL 33525
Remove			
3) X Change	VP	Roger Abreu	114 Lake Drive
Add			Lutz, FL 33548
Remove			
4) Change	F#-		_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	·
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)	
N/A	
	·

The date of each amendment(s) add	1/19/2016 potion:	, if other than the
date this document was signed.		, ii other man an
Effective date if applicable:		
 	(no more than 90 days after amendment file date)	
Note: If the date inserted in this ble document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date artment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s ficient for approval.)
	oved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	nt
	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	sted by the board of directors without shareholder action and shareholde	г
action was not required. Dated Signature	oted by the incorporators without shareholder action and shareholder	
	ector, president or other officer - if directors or officers have not been	
	, by an incorporator — if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	;
1	Brian K. Crist	
_	(Typed or printed name of person signing)	
1	President	
-	(Title of nercon cigning)	