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COVER LETTER

- TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations	
NAME OF CORPORATION: Majestic Machine & Engineering, Inc	<u>.</u> .
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Name of Condact Person	
Majestic Machine + Engineering, Inc. Firm/Company	
570 U.S. Hwy 90 East	
Baldwin, FL 32234 City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Contact Person at (904) 356-1406 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee \$\begin{array}{c} \$\\$43.75 Filing Fee & \$\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

(Name of Corporation as currently f	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
majestic Mackine : name must be distinguishable and contain the word "corporation,"	IncThe new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A 68
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent N/A	
New Registered Office Address: New Registered Office Address:	address), Florida ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.

N/A
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>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name N/A	<u>Addres</u> s
1) Change		10 / 71	
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change		_	
Add			
Remove			-alm _{edical} -age.
6) Change			
Add			
Remove			

Attach addi	or adding additional Artional Sheets, if necessary)	. (Be specific)			
	N/A				
	10 / 11				
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If an amen	ment provides for an ex	change, reclassifica	ation, or cancellatio	on of issued shares,	
provisions	for implementing the an	rendment if not cor	<u>itained in the amen</u>	dment itself:	
	applicable, indicate N/A)				
	N/A				
	,				
					·

The date of each amendment(s) adoption: _ date this document was signed.	December 1, 2015	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 document's effective date on the Department of	not meet the applicable statutory filing requirements, this date of State's records.	will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s) r approval.	
	the shareholders through voting groups. The following statement ag group entitled to vote separately on the amendment(s):	
"The number of votes cast for the am	endment(s) was/were sufficient for approval	
by(v	oting group)	
The amendment(s) was/were adopted by th action was not required.	e board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by th action was not required.	e incorporators without shareholder action and shareholder	
Dated/2~/-,	15	
Signature Jour	Higher	
	esident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court	
	ry by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	