P04000159928

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF COR	PORATION: Transportation Management Services of Brevard, Inc.						
DOCUMENT NU	JMBER: P04000159928						
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all co	prrespondence concerning this matter to the following:						
	Jennifer Isaac						
	Name of Contact Person						
	Medical Transporation Management, Inc.						
	Firm/ Company						
	16 Hawk Ridge Cir						
	Address						
	Lake St. Louis, MO 63367						
City/ State and Zip Code							
	jisaac@mtm-inc.net						
	E-mail address: (to be used for future annual report notification)						
For further inform	ation concerning this matter, please call:						
Jennifer Isaac	at ()						
Na	me of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a chec	k for the following amount made payable to the Florida Department of State:						
S35 Filing Fee	S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current			
	tly filed with the Florida Dept. of Stat	<u>e)</u>	
P04000159928			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the	following amendme	nt(s) to
A. If amending name, enter the new name of the corporation:			
		. The new	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name mus	obreviation "Corp.," st contain the word	
B. Enter new principal office address, if applicable:	16 Hawk Ridge Cir		
(Principal office address MUST BE A STREET ADDRESS)	Lake St. Louis, MO 63367		
		 :	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16 Hawk Ridge Cir		
	Lake St. Louis, MO 63367		
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the	<u> </u>	
new registered agent and/or the new registered office addres Name of New Registered Agent		· 	
Name of New Registered Agent	<u></u>	<u> </u>	
Name of New Registered Agent (Florida st	treet address)		
Name of New Registered Agent	<u></u>		

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; CE() = Chief Executive Officer; CF() = 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> <u>Joh</u>	n Doc		
X Remove	<u>V</u> <u>Mil</u>	Mike Jones		
<u>X</u> Add	<u>SV</u> <u>Sal</u>	ly Smith	•	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	P, CEO	Alaina Macia	4 Windsor Lane	
<u>x</u> Add			Kirkwood, MO 63122	
Remove				
2) Change	_CFO	Jill Heneghan	103 Forest Club Court	
x Add			Lake St. Louis, MO 63367	
Remove Change	<u>S</u>	Thomas Wiese		
_X Add			129 Country Ridge (
Remove			Columbia, IL 62236	
4) Change	<u> </u>	Gina Wright	816 Charlesgate Drive	
<u>x</u> Add			St. Louis, MO 63132	
Remove 5) Change	CEO, P	Edward Van Horne	4400 Hwy 121, Suite 700	
Add	_ 	Davida Van Home	Lewisville, TX 75056	
_x Remove				
6) Change	<u>_S</u>	Thomas Cook	4400 Hwy 121, Sutte 700 😤	
Add			Lewisville, TX 75056	
X Remove			SSP 48	
7) Remove	CFO, D	Michael Preissler	4400 Hwy 121, Suite 50 0 c Lewisville, TX 7505 c 22	

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The date of each amendment(s) adoption date this document was signed.	otion: October 1, 2024	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirements, this date rtment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators, or board of directors without shareholder action	and shareholder
☑ The amendment(s) was/were adopte by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statemen ch voting group entitled to vote separately on the amendment(s):	t :
"The number of votes east for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated October 2	8, 2024	
Dated <u>October 2</u> Signature	laina Nacia'	
(By a direc	etor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court	
	fiduciary by that fiduciary)	1
	Alaina Macia	
	(Typed or printed name of person signing)	
	CEO & President	
	(Title of person signing)	

2024 MOV -6 AH 8: 34
SECN LIAMY OF STATE
TALLAHASSEE, FL