P05000154336

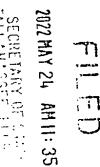
(Requestor's Name)
(Address)
(Address)
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(Business Entity Name)
(Document Number)
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J. HORNE
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- 1

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	MTA Partners, INC RATION:	· · · · · · · · · · · · · · · · · · ·	
DOCUMENT NUMI	P05000154336 BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Dave Mohren		
	MTA Partners, Inc.	Name of Contact Person	1
	86 Main Street	Firm/ Company	
	Succasunna, NJ 07876	Address	
		City/ State and Zip Code	2
	dave@c21gopro.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Dave Mohren		813 at (393-6177
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment 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)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassec, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee 3. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILE	<u>-</u>
20122 4	- 1.,7
2022 MAY 24 A	M.J.
500	777

(Name of Corporation as currently filed with the Florida Dept. of State) [SECRETARY OF STATE ARASSEE FOR STATE OF STATE

P 05000154336

(Document Number of Corporation (if known)

ame must be distinguishable and contain the word "corporation, Inc.," or Co.," or the designation "Corp," "Inc." or "Co"	The
chartered," "professional association," or the abbreviation "P.	'. A professional corporation name must contain the w
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
. If amending the registered agent and/or registered office :	
new registered agent and/or the new registered office add	ress:
	ress:
Name of New Registered Agent Name of New Registered Agent	ress:
Name of New Registered Agent Name of New Registered Agent	ress:

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, 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.

<u>X</u> Change	<u>PT</u>	John Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Namç</u>		Address
1) Change		_	/_	/
Add			_	
Remove			_	
2) Change				
Add		\	-	
Remove Change				
Add		\ \	_	
Remove			_	
4) Change				
Add			_	
Remove		/	_	
5)Change	/	<u> </u>		
Add			_	
Remove				· <u>-</u>
6) Change /	<i></i>			
Add /			_	
Remove				

nending or adding addition: ch additional sheets, if neces:	sal Articles, enter change(s) here: (Sary). (Be specific)
•	
	
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<i>[.</i>	
· ·	
amendment provides for a	in exchange, reclassification, or cancellation of issued shares,
isions for implementing th	ne amendment if not contained in the amendment itself:
(if not applicable, indicate N	√/A)
· · · · · · · · · · · · · · · · · · ·	
	<u> </u>
	,

The date of each amendment(s) addate this document was signed.	doption: DATE DOCUMENT SIGNED, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement 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
bv	
	(voting group)
Datu	5-20-22 \611 Jhren -
selected	rector, 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 defiduciary by that fiduciary)
	Dave Mohren
	(Typed or printed name of person signing) Director/Owner
	(Title of person signing)