## P06000049886

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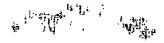
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## **COVER LETTER**



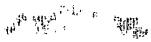
**TO:** Amendment Section Division of Corporations

2812 HAY 1 1 PM 4: &:

NAME OF CORPOR	M.M. LEMUS, P.	Α.				
DOCUMENT NUME						
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	Mandy Lemus					
	Name of Contact Person					
	M.M. LEMUS, P.A.					
		Firm/ Company				
	8335 SW 101st Place Rd	. ,				
		Address				
	Ocala, FL 34481					
•		City/ State and Zip Cod	e			
	manage and a second					
mme	musrealtor@aol.com	sed for future annual report	notification\			
For further information  Mandy Lemus	n concerning this matter, pleas		202 11051			
	of Contact Person	at ( 901	de & Daytime Telephone Number			
	the following amount made					
\$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)			
(Amendment Section) (Division of Gorporations) (P.O. Box 6327) (Tallahassee, F.E. 32314)		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of.



M.M. LEMUS, P.A. 2010 KAY III (Name of Corporation as currently filed with the Florida Dept. of State) P06000049886 (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: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida\_ (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>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally St	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
I) Change	VP/T/I	<u> </u>	Ocando, Audymar Y	8335 SW 101st Place Rd
Add				Ocala, FL 34481
X Remove				
2) X Change	P/S	_	Lemus, Mandy	8335 SW 101st Place Rd
Add				Ocala, FL 34481
Remove				
3) Change				
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change		<del></del>		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
	•
<del>_</del>	
	· · · · · · · · · · · · · · · · · · ·
an amendment provides for an eych	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) : date this document was signed.	adoption:	, if other than the
	2/2018	
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 E	block does not meet the applicable statutory filing requirements, this da	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment( ufficient for approval.	s)
	proved by the shareholders through voting groups. The following statemed are each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	77	
	(voting group)	
The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareholder	er
The amendment(s) was/were ac action was not required.	lopted by the incorporators without shareholder action and shareholder	
(Dated 3-19	-18 Millian	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	rt
	Mandy Lemus	
	(Typed or printed name of person signing)	·····
	President	
	(Title of person signing)	