# Po8000086586

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ac                     | ldress)            | _         |
| (Ac                     | ldress)            |           |
| (Ci                     | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | isiness Entity Nan | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
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SUCRETARY OF STARE

M 18923

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORI   | PORATION:                                    | MJB Hauling & Equipment   | Inc   |
|--|--|---|---|
| DOCUMENT NU  | MBER:  | P08000086586  |   |
| The enclosed Artic   | cles of Amendment and fee                    | are submitted for filing.   |   |
| Please return all co   | orrespondence concerning th                  | nis matter to the following:  |   |
|  | <del></del>                                  | Michelle Herschler  |   |
| Name of Contact Person   |  | Name of Contact Person  |   |
| MJB Hauling & Equi   |  | Hauling & Equipment Inc   |   |
| Firm/ Company  |  |   |   |
|  | 6804 SW 114th Place, Unit H                  |   |   |
| Address  |  | ***************************************   |   |
|  |  | Miami, FL 33173   |   |
|  | City/ State and Zip Code                     |   |   |
|  | Michelle.he<br>E-mail address: (to be us     | erschler@comcast.net<br>ed for future annual report notification)                                       |   |
| For further informa  | ation concerning this matter                 | , please call:  |   |
| Mi   | chelle Herschler                             | at ( 305 ) 29   | 9-8761  |
| Name   | of Contact Person                            | Area Code & Daytime Tele  | phone Number  |
| Enclosed is a checi  | k for the following amount                   | made payable to the Florida Departi   | ment 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) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |  | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle | •   |

Tallahassee, FL 32301

June 15, 2010

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Subject: MJB Hauling & Equipment Inc Document Number: P08000086586

On May 21, 2010 I (Michelle Herschler) incorrectly filed for Fictitious Name to change the name of my corporation. My application was returned and upon calling Division of Corporations I was informed I needed to file Articles of Amendments form instead. In speaking with both departments they told me that they could apply the \$50 fee I paid for Fictitious name filing to the \$35 fee for the Articles of Amendments.

Thank you for your attention on this matter. If you have any questions or if there is a problem with the processing of this transaction you can reach me (Michelle Herschler) at 305-299-8761.

Sincerely

Michelle Herschler

President

SERRIARY OF STANCE

# **Articles of Amendment Articles of Incorporation** of



## MJB Hauling & Equipment Inc

#### (Name of Corporation as currently filed with the Florida Dept. of State)

#### P08000086586

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

|   | nderground Utilit  | ties Inc               | The nev                    |
|---|--------------------|------------------------|----------------------------|
| name must be distinguishable and conta<br>abbreviation "Corp.," "Inc.," or Co.," or<br>name must contain the word "chartered," "                  | the designation "C | Corp," "Inc," or "Co". | A professional corporation |
| B. Enter new principal office address, if a (Principal office address) MUST BE A STR  |                    | n/a                    |                            |
| C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF  |                    | n/a                    |                            |
| - · · · · · · · · · · · · · · · · · · ·   |                    |                        | er the name of the         |
| D. It amending the registered agent and/o<br>new registered agent and/or the new r  |                    | uress:                 |                            |
| D. If amending the registered agent and/onew registered agent and/or the new remains and the new registered agent:  Name of New Registered Agent: | n/a                | uress;                 | _                          |
| new registered agent and/or the new r   | n/a                | ida street address)    | <br>                       |
| new registered agent and/or the new r   | n/a<br>(Flor       | ida street address)    | , Florida                  |
| new registered agent and/or the new r   | n/a                | ida street address)    | , Florida<br>2 Code)       |

# 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)

| <u>Title</u> | <u>Name</u>  | Address | Type of Action |
|--------------|--|---------|----------------|
|              |  |         | ☐ Add☐ Remove  |
|              | <del></del>  |         |                |
|              |  |         |                |
|              | ding or adding additional Articles, entenditional sheets, if necessary). (Be spec                                |         |                |
|              |  |         |                |
| provisi      | mendment provides for an exchange, re<br>ions for implementing the amendment if<br>not applicable, indicate N/A) |         |                |
|              |  |         |                |
|              |  |         |                |
|              |  |         |                |

| The date of each amendment(s):                             | adoption: <u>5/21/2010</u>   |
|--|--|
| Effective date if applicable:                              | • (date of adoption is required)   |
| (n   | o more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                                   | (CHECK ONE)  |
| The amendment(s) was/were a by the shareholders was/were s | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.   |
|  | pproved by the shareholders through voting groups. The following statement or 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  |
| by   | .,   |
| (vo  | eting group)   |
| The amendment(s) was/were a action was not required.       | dopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/were a action was not required.       | dopted by the incorporators without shareholder action and shareholder   |
| Dated 6/15/20  | 10   |
| Signature  | Lichelle Herechl   |
|  | irector, president or other officer – if directors or officers have not been<br>l, by an incorporator – if in the hands of a receiver, trustee, or other court |
|  | ed fiduciary by that fiduciary)  |
|  | Michelle Herschler   |
| _  | (Typed or printed name of person signing)  |
|  | President  |
|  | (Title of person signing)  |
|  |  |