# P10000006507

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORI	PORATION:	lan Delivery Senvices	mc
DOCUMENT NU	MBER:	P100000 6507	
The enclosed Artic	eles of Amendment and fee	are submitted for filing.	
Please return all co	orrespondence concerning the	his matter to the following:	
		Reyes Farada	
		Name of Contact Person	
	MAR	Delivery Sewices Dr	10
		Firm/ Company	
	4	486 Philadel phia C	lír.
		Address	
		Kissinmee, 71 34741	,
		City/ State and Zip Code	
	E-mail address: (to be us	sed for future annual report notification)	
For further informa	ation concerning this matter	r, please call:	
•	Reyes PARADA of Contact Person	at (	
Name	of Contact Person	Area Code & Daytime Tel	lephone Number
Enclosed is a check	k for the following amount	made payable to the Florida Depar	tment 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		Street Address	
Amendment Section		Amendment Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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



February 2, 2010

REYES PARADA 4486 PHILADELPHIA CIR KISSIMMEE, FL 34741

SUBJECT: MAR DELIVERY SERVICES INC.

Ref. Number: P1000006507

We have received your document for MAR DELIVERY SERVICES INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Letter Number: 910A00002610

Carol Mustain Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

#### **Articles of Amendment**

to

### **Articles of Incorporation**

of
MAR Delivery Services Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
P1000006507 = 3
(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)  Kissimmee, 71 34741
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  4486 Philadel phialing  Kissimmee, 71 34741
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: Reyes Farada  4486 Philodephia Cir.
<u>New Registered Office Address:</u> (Florida street address)
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with 9hd accept the obligations of the position.
Signature of New Registered Agent, if changing
and the state of t

## removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Title . Name 1 <u>Address</u> Type of Action E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) (1) To Ammend Unicle II consecring Junicipal place of susmess address 10: 4486 Philadelphia Cir., Ressimmer, FL 34741 To Amend ant. III correcting mailing address Tobe: 4486 Philadelphia Cii, Kissimmee, 71 34741 3 To Avend av. II. conserving the addiess of the incaparator to be: 4486 Philadelphia Cir. Kissemmee, 71 34741 To Amend article VII TO ansect the address of the 12/1/14/08/10 10 F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, be: 4486 provisions for implementing the amendment if not contained in the amendment itself: Richdelphia Cir (if not applicable, indicate $\overline{N/A}$ ) Kissemmee 72

If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendment(s)	
Effective date if applicable:	(date of adoption is required)
(n	TEB 72, 2010  so more than 90 days after amendment file date)
•	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
The amendment(s) was/were a must be separately provided for	approved 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	t for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(vo	oting 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	2-22-2019
Signature	des
selected	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
_	(Typed or printed name of person signing)
	President
_	(Title of person signing)