P10000615150

(Requestor's Name)				
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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JUL 11 2017

T. LEMIEUX



COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION:	MPS L	onil Services	The.	
DOCUMENT NUMBER:) / <u>0000</u>	015150		
The enclosed Articles of Amendment	and fee are su	bmitted for filing.		
Please return all correspondence conc	erning this ma	tter to the following:		
	Toe	A. Centeno Name of Contact Person		
······································	mps 1	Firm/ Company	,Inc.	
		Old US 41 Address		
	H. Mu	City/ State and Zip Code		
E-mail address: (to be used for future annual report notification)				
For further information concerning the	<u> </u>	at (239) 236 - 0165 de & Daytime Telephone Number	
Enclosed is a check for the following				
•	Filing Fee & ate 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 Corpora P.O. Box 6327 Tallahassee, FL 323	tions	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle issee, FL 32301	

Articles of Amendment to

Articles of Incorporation

of

mps Land Service	o, Inc.
(Name of Corporation as currently	filed with the Florida Dept. of State)
P10000015150	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
410	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Ala
D. If amending the registered agent and/or registered office address: Name of New Registered Agent Name of New Registered Agent	
(Clasida etc.)	
(Florida stre	vel address)
New Registered Office Address:	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar we have a signature of New R	

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 Jone	<u>es</u>			
X Add	<u>sv</u>	Sally Smi	<u>th</u>			
Type of Action (Check One)	Title	1	<u>Name</u>			Address
1) Change	19, <u>Ser</u>	nctary .	Ronnie	Michael	<u>Barrow</u>	16205 012 US 41
Add Remove					-	PL.Myr, 21 33912
2) Change	 					
Add					-	
3) Change				2		
Remove						
4) Change		 -				
Add					-	
5) Change		-			 -	
Add Remove					-	
6) Change			waren and a second a second and			
Add					-	
Remove						

. If amending or adding additional Arti	icles, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
Ala	
1)//2	
If an amandment provides for an aval	nange, 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)	
Ala	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	· ·	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the De	plock does not meet the applicable statutory filing requirements epartment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amer of ifficient for approval.	ndment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and sh	areholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	older
Dated	24.7	
•,	1	
Signature	ol, Cé. (VA	
(B y/ a c	lirector, president or other officer - if directors or officers have n	ot been
	d, by an incorporator - if in the hands of a receiver, trustee, or ot	her court
appoin	ted fiduciary by that fiduciary)	
	Joe A. Centena On	
	(Typed or printed name of person signing)	,
	Zan da 9	
	(Title of person signing)	