

P10000090786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

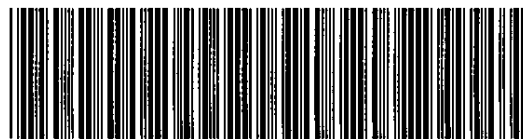
(Business Entity Name)

(Document Number)

Certified Copies _ _ _ Certificates of Status _

Special Instructions to Filing Officer:

Office Use Only



500238787675

08/24/12--01010--025 **43.75

Amens

FILED
12 AUG 24 AM 11:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 27 2012

T. ROBERTS

DOMENIC A. BELLISARIO

ATTORNEY AT LAW

The Grant Building
310 Grant Street, Suite 1302
Pittsburgh, Pennsylvania 15219
(412) 471-6463
Fax (412) 223-4294
email: domenic@bellisario.com
www.bellisario.com



August 20, 2012

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

Re: MPG Associates, Inc.
Document No.: P10000090796

Dear Sir/Madam:

Enclosed for filing please find a Cover letter, Articles of Amendment to Articles of Incorporation, and a check in the amount of \$43.75. Please process this matter and issue a Certificate of Status reflecting the amendments.

If you have any questions or comments regarding this matter, please contact me.

Sincerely,

Domenic A. Bellisario

DAB/db

Enclosures

cc: Michael Gualtieri

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MPG ASSOCIATES, INC.

DOCUMENT NUMBER: P10000090796

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Domenic A. Bellisario

Name of Contact Person

Law Office of Domenic A. Bellisario

Firm/ Company

310 Grant Street Suite 1302

Address

Pittsburgh, PA 15219

City/ State and Zip Code

mgualtieri13@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Domenic A. Bellisario

Name of Contact Person

at (412) 471-6463

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

Articles of Amendment
to
Articles of Incorporation
of

MPG ASSOCIATES, INC.

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

P10000090796

(Document Number of Corporation (if known))

FILED
12 AUG 24 AM 11:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

The new 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:

☒ Change PT John Doe
☐ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>MGR</u>	<u>Michael P. Gualtieri</u>	<u>1040 Biscayne Blvd. Unit 3003</u> <u>Miami, FL 33132</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PST</u>	<u>Robert K. McGill</u>	<u>307 Cleveland Avenue, NW</u> <u>Canton, OH 44702</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____

[illegible][illegible]

The date of each amendment(s) adoption: July 1, 2012

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for 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 _____"
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated August 6, 2012

Signature Robert K. McGill
(By a director, president or other officer -- if directors or officers have not been selected, by an incorporator -- if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Robert K. McGill

(Typed or printed name of person signing)

President, Secretary and Treasurer

(Title of person signing)