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T. LEMIEUX



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: MTL UNITED, IN	łC.	
DOCUMENT NUM	BER: P11000084444		
	of Amendment and fee are su	bmitted for tiling.	
Please return all corre	espondence concerning this ma	tter to the following:	
	MOHAMMED R GHAREEI	В	
	MTL UNITED, INC.	Name of Contact Person	1
		Firm/ Company	
	851 CYPRESS PARKWAY	• ,	
	· .	Address	
	POINCIANA FL 34759		
		City/ State and Zip Cod	v
omr	g01@yahoo.com		
	= =: -	sed for future annual report	notification)
For further information	on concerning this matter, pleas		924-5679
Name of Contact Person		at ( Area Co	de & Daytime Telephone Number
	or the following amount made		
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An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Ameno Divisio Clirton 2661 E	Address  Iment Section on of Corporations Building Executive Center Circle assec, F1, 32301

## Articles of Amendment to Articles of Incorporation

FILED

MTL UNITED, INC.	211 HAY 29 P S 58
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P11000084444	SEDREJARY DE STATE.
(Document Number of	of Corporation (if known) BALL ANASSET: FLORIUM
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A
	<del></del>
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office addres	<u>s:</u>
Name of New Registered Agent N/A	<u>.                                    </u>
(Florida s	treet address)
New Registered Office Address:	. Florida
sen negtherea Office Mainess.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
t hereo, weeps me appointment as registered agent. I am jamittat	and that accept the bougaitons 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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	ith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
I) Change	VP		TIA T DONOHUE	711 TOLTEC PL
Add				KISSIMMEE, FL 34758
X Remove				
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				7777
6) Change		_		
Add				
Remove				

(Atta	mending or adding additional Articles, enter change(s) here: sech additional sheets, if necessary). (Be specific)
N/A	
_	
	<del></del>
F. <u>If a</u> <u>pr</u> N/A	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate NZA)

	05/25/2018	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
03 Effective date <u>if applicable</u> :	5/25/2018	
<u>паррисане</u> .	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the l	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
-	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder	
action was not required.	adopted by the incorporators without shareholder action and shareholder	
05/25/20 Dated	018	
	./	
Signature	14/	
selec	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	<del></del>
	MOHAMMED R GHAREEB	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u></u>