P120000 21698

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	•
(Cit	y/State/Zip/Phone	; #)
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. PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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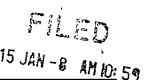
JAN 12 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corpora	illons			
NAME OF CORPORA	M&S Acc R: P120000216	ounting PA 698		
			· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of	"Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
	IOSEPHINE B	SINCLAIR		
_		Name of Contact Person)	
	14500 004 450	Firm/ Company		
	1523 SW 152			
	ALABALEL 2240	Address		
<u>l</u> '	MIAMI FL 3319			
		City/ State and Zip Code		
108	SIE@MSACCO			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information of	concerning this matter, pleas	se call:		
JOSEPHINE	B SINCLAIR	at (786	, 405-5939	
Name of	Contact Person		de & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment 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)	
Amen Divisi P.O. E	ng Address Idment Section on of Corporations Fox 6327 assee, F1, 32314	Amend Divisio Clifton 2661 E	Address Innent Section In of Corporations Building Executive Center Circle Inssee, FL 32301	

Articles of Amendment to Articles of Incorporation



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M&S Accounting PA

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

P12000021698

(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:

	Corp," "Inc," or	ion," "company," or "incorporated" or the a "Co". A professional corporation name must "P.A."	
Enter new principal office address, if appl		JOSEPHINE B SINCLAIR	
ncipal office address <u>MUST BE A STREET</u>	ADDRESS)	11523 SW 152 PL	
		MIAMI FL 33196	
Enter new mailing address, if applicable:		PO BOX 960011	
(Mailing address MAY RE A POST OFFICE	E ROX)	1 0 000011	
(Mailing address MAY BE A POST OFFICE If amending the registered agent and/or reg		MIAMI FL 33296	
f amending the registered agent and/or reg	ristered office add	MIAMI FL 33296 dress in Florida, enter the name of the	
If amending the registered agent and/or reg new registered agent and/or the new registe	zistered office ad ered office addres	MIAMI FL 33296 dress in Florida, enter the name of the	
If amending the registered agent and/or reg new registered agent and/or the new registe	zistered office ad ered office addres	MIAMI FL 33296 dress in Florida, enter the name of the ss: dreet address)	

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	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
			
6) Change		-	
Add			
Remove			

(Attach addi	g or adding additional Articles, enter change(s) here: tional sheets, if necessary). (Be specific)
1	NA
	NA
<u> </u>	
	
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If an ameno	lment provides for an exchange, reclassification, or cancellation of issued shares,
provisions (if not	for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)
	J A-
	<u> </u>
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption: 01/01/2015	, if other than the
date this document was signed.	
Effective date if applicable: 01/01/2015	
(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)	
(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_01/01/2015	
Signature Signature	
(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)	
JOSEPHINE B SINCLAIR	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person cigning)	