12000030303

(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



100355427101

100355427101 11/30/20--01002--017 **43.75

2020 NOV 25 PH 4: 34

RECEIVED

2020 NOY 25 AM 9: 46

TAL COURIER SERVICES, INC	
2330 CLAREBRIVE	
TALLAHASSEE, FL 32309	
(850) 524-5437 (950) 524-6343	
(850) 524-6243	
•	
	(OFFICE USE ONLY)
Business Name & Document Number, (if kno	own):
1. Bruce N. McDonald Corporation	P1200003030
Name	Document Number (if known)
Name	
x Walk in	Will wait
X WAIK III	
Certified Copy	
	
Certificate of Status	
NOW BUT INCO	<u>AMENDMENTS</u>
<u>NEW FILINGS</u>	
Profit	X_ Amendment
Not for Profit	Resignation of R.A. Officer/Director
	Change of Registered Agent
Limited Liability Domestication	Dissolution/Withdrawal
INC	Conversion
	
OTHER	Merger
	0
OTHER FILINGS	REGISTRATION/OUALIFICATIONS
Annual Report	Foreign
•	Limited Partnership
Fictitious Name	Reinstatement
Statement of Authority	
_ 	Trademark
APOSTIL ()	Other
COUNTRY	

EXAMINER'S INITIALS:_____

CLEAN PRIVE LLAHASSEE, FL 32309

(850) 524-5437 (850) 524-6243

Business Name & Document Number, (if	(OFFICE USE ONLY)
1. Bruce N. McDonald Corporation	P1200003030
Name	Document Number (if known)
x_ Walk in	Will wait
Certified Copy	
Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication INC	X AmendmentResignation of R.A. Officer/DirectorChange of Registered AgentDissolution/WithdrawalConversion
OTHER	Merger
OTHER FILINGS	REGISTRATION/QUALIFICATIONS
Annual Report	Foreign
Fictitious Name	Limited PartnershipReinstatement
Statement of Authority	
APOSTIL ()COUNTRY	Trademark Other
	EXAMINER'S INITIALS:

COVER LETTER

TO: Amendment Section Division of Corporations	1 - 1
\mathcal{Q}_{\cdots}	* N. ME DONALD (ORPORATION
NAME OF CORPORATION:	XIV. IVI= JONALD CONFORATION
DOCUMENT NUMBER:	0000 3030
The enclosed Atticles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
	BULLE ME DONAUS
	Name of Contact Person
	WW WE I DIAZO CORPORATED
	Firm ⁷ Company
240 NW	127 STUNT
	Address
- B	OCA KASON FL. 33432
	City: State and Zip Code
Ď.,	Man I as And Com
E-mail address: (to be	weed for hiture annual report notification)
<u> </u>	
For further information concerning this matter, ple	use call:
BAURT MG YONAZO	11(561) 255.0721
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	e psyable to the Florida Department of State:
S\$\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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 Division of Corporations	Amendment Section
P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Talluhussee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

Articles a	of Amendment	
Articles of	to Incorporation	
Bruce W. M. I	DENGLO PORFORSTION	
(Name of Cornoration as curre	ently flied with the Florida Dent. of State)	
P120000 30 303		_
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	his Florida Profit Corporation adopts the following ame	endment(s) to
A. If amending name, enter the new name of the cornoration	1	
Bruck N MET	DONALD (ORPORATION) THE	Martin.
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.	""compuny," or "incorporated" or the abbreviation "Co A professional corporation name must contain the	orp.," word
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 ROX)		
		12021
	·	<u> </u>
b. If amending the registered agent and/or registered office and new registered agent and/or the new registered office addr	ddress in Florida, enter the name of the	25 A
Same of New Registered Agent	The c	x
1	֓֞֞֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	ë –
(Florida	street address)	ğ
New Registered Office Address:	, Florida	The new "Corp" the word
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	I <u>NU:</u> or with and accept the obligations of the position	
	\	
Signature of New	Registered Agent, if changing	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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

X Change	<u>P1</u>	John Doe		
X Remove	Y	Mike Jones		
∠X Add	<u>\$Y</u>	Sally Smith		2025
Type of Action (Check One)	Title	Name	Address	2020 HOY
1) Change				25
Add				A A
Remove				
2) Change				
Add				
Remove Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		-		<u> </u>
Add				·
Remove				
6) Change				
Add				
Remove				

The date of each amendment(s) as	inoitqui.	, if c	ther the	เกิ
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 b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date with partment of State's records.	ill not be	listed a	13
Adoption of Amendment(s)	(CHECK ONE)			
The innendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action an	d shareh	older	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.		20.	
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):		2020 NOV	•
"The number of votes cast	for the amendment(s) was/were sufficient for approval		25	
b>			A	
	(voting group)			
		المراشر	9: 46	
Dated //	1/23/20	កែ	δ	
<u></u>	(Alba)			
Signature	ector, president of other officer - if directors or officers have not been	_		
selected	, by an incorporator - if in the hands of a receiver, trustee, or other court			
appoints	ed fiduciary by that fiduciary)			
_	Krice N. WE Down			
	(Typed or printed name of person signing)			
	//			
	PIE.			