# P12000087538

| (Requestor's Name)                      |  |  |  |
|---|--|--|--|
| (Address)                               |  |  |  |
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| (City/State/Zip/Phone #)                |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |
| (Business Entity Name)                  |  |  |  |
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Amend Mame
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#### **COVER LETTER**

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TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION:   | OF CORPORATION: MP & L GOLDEN TRANS SERVICES INC  |  |  |  |  |
|--|---|--|--|--|--|
| DOCUMENT NUMBER:   | P12000087538  |  |  |  |  |
| The enclosed Articles of Amendmen  | nt and fee are submitted for filing.  |  |  |  |  |
| Please return all correspondence cor   | ncerning this matter to the following:  |  |  |  |  |
|  | SAUL VELEZ  |  |  |  |  |
|  | Name of Contact Person  |  |  |  |  |
| ВА   | ND P CONSULTANTS SERVICES INC   |  |  |  |  |
| Firm/ Company  |   |  |  |  |  |
|  | 3501 W VINE ST STE 318  |  |  |  |  |
|  | Address   |  |  |  |  |
|  | KISSIMMEE FL 34741  |  |  |  |  |
|  | City/ State and Zip Code  |  |  |  |  |
| E-mail addro   | pandpconsultants@yahoo.com ess: (to be used for future annual report notification)  |  |  |  |  |
| For further information concerning   | this matter, please call:   |  |  |  |  |
| SAUL VELEZ   | at ( <u>407</u> ) <u>8461040</u>  |  |  |  |  |
| Name of Contact Person   | Area Code & Daytime Telephone Number  |  |  |  |  |
| Enclosed is a check for the followin   | g amount made payable to the Florida Department of State:   |  |  |  |  |
| ✓ \$35 Filing Fee S43.75 Filing Certificate of   |   |  |  |  |  |
| 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**

#### **Articles of Incorporation**

### MP & L GOLDEN TRANS SERVICES INC

#### P12000087538

|   | Articles of Amendment<br>to<br>Articles of Incorporation  |                            | STATE OF THE PARTY |
|---|---|----------------------------|--|
| · · · ·   | of  | P                          | To the s   |
| MP & L GOLDE  | N TRANS SERVICES  | INC                        | The state of the s |
| (Name of Corporation as cu  | rrently filed with the Florida  | Dept. of State)            | The state of the s |
|   | 12000087538   |                            | Un Ch  |
| (Document N   | lumber of Corporation (if know  | n)                         | A CO   |
| Pursuant to the provisions of section 607.1 amendment(s) to its Articles of Incorporation   |   | rida Profit Corporation ac | lopts the following  |
| A. If amending name, enter the new nam  | e of the corporation:   |                            |  |
| M&PL G  | DLDEN SERVICES INC  |                            | The new  |
| abbreviation "Corp.," "Inc.," or Co.," or   |   |                            | •  |
| B. Enter new principal office address, if a   | pplicable:  | ne abbreviation "P.A."     |  |
| B. Enter new principal office address, if a (Principal office address MUST BE A STR)  C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF)  D. If amending the registered agent and/onew registered agent and/or the new registered Agent:   | pplicable: EET ADDRESS )  plc: FICE BOX;  or registered office address in                           |                            |  |
| <ul> <li>B. Enter new principal office address, if a (Principal office address MUST BE A STR)</li> <li>C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF)</li> <li>D. If amending the registered agent and/onew registered agent and/or the new registered agent and/or the new registered.</li> </ul> | pplicable: EET ADDRESS )  plc: FICE BOX;  or registered office address in                           |                            |  |
| B. Enter new principal office address, if a (Principal office address MUST BE A STR)  C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF)  D. If amending the registered agent and/onew registered agent and/or the new resistered agent and/or the new registered agent.                               | pplicable: EET ADDRESS )  plc: FICE BOX;  or registered office address in                           | Florida, enter the name o  |  |
| B. Enter new principal office address, if a (Principal office address MUST BE A STR)  C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF)  D. If amending the registered agent and/or new registered agent and/or the new resistered agent and/or the new resistered agent.                             | pplicable: EET ADDRESS )  Dle: FICE BOX)  or registered office address in egistered office address: | Florida, enter the name o  |  |

## 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)

| <u>Title</u> | <u>Name</u>                      | <u>Address</u>  | Type of Action |
|--------------|----------------------------------|---|----------------|
| P            | PETER LEMKE                      | 5091 ERNST CT<br>ORLANDO FL 32811   |                |
| VPD_         | MARIA LEMKE                      | 5091 ERNST CT<br>ORLANDO FL 32811   | _              |
| <u>P</u>     | MARIA LEMKE                      | 5091 ERNST CT<br>ORLANDO FL 32811   |                |
| (anden a     | dditional sheets, if necessary). | The apeciate)   |                |
|              |                                  |   |                |
| provisi      |                                  | hange, reclassification, or cancellation indment if not contained in the amendm |                |
|              |                                  |   |                |
|              |                                  |   |                |
|              | <u>.</u>                         |   | <del>.</del>   |

| The date of each amendmen                         | t(s) adoption: <u>08</u>   | 3/08/2017  |
|---|--|--|
| Effective date <u>if applicable</u> :             | 08/08/2017   | (date of adoption is required)   |
|   | (no more than 9  | 00 days after amendment file date)   |
| Adoption of Amendment(s)                          | ( <u>CH</u>  | IECK ONE)  |
| The amendment(s) was/we by the shareholders was/w |  | shareholders. The number of votes cast for the amendment(s) approval.  |
|   |  | ne shareholders through voting groups. The following statement<br>group entitled to vote separately on the amendment(s):                           |
| "The number of votes                              | cast for the amen  | adment(s) was/were sufficient for approval   |
| hy  |  |  |
|   | (voting group)   |  |
| The amendment(s) was/we action was not required.  | ere adopted by the   | e board of directors without shareholder action and shareholder  |
| The amendment(s) was/we action was not required.  | ere adopted by the   | e incorporators without shareholder action and shareholder   |
| Dated_08/0  | 08/2017  |  |
| , śel   | y a director, president of the property of the | dent or other officer – if directors or officers have not been porator – if in-the hands of a receiver, trustee, or other court by-that fiduciary) |
| ,   |  |  |
|   |  | MARIA LEMKE  |
|   | (1 <u>y</u>  | ped or printed name of person signing)   |
|   |  | VPD  |
|   | (Title o   | of person signing)   |