P130000 43651

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MDB Self Storage	Corp				
DOCUMENT NUM	P13000043651					
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	Michael Bur					
		Name of Contact Person				
	MDB Self Storage Corp					
	Firm/ Company					
	9505 Sandy Ct	, ,				
	Address					
	Manassas VA 20110					
	 	City/ State and Zip Code	 			
mdt	oselfstorage@gmail.com					
	E-mail address: (to be u	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
Michael Bur		at (703	283-6466 le & Daytime Telephone Number			
Name of Contact Person		Area Coo	de & Daytime Telephone Number			
Enclosed is a check f	for the following amount made	payable to the Florida Depa	rtment 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle			

Tallahassee, Fl. 32301

Articles of Amendment to Articles of Incorporation of

MDB Self Storage Corp (Name of Corporation as currently filed with the Florida Dept. of State) P13000043651 (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: A. If amending name, enter the new name of the corporation: N/A 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	DS	Marsha Bur	1038 Sumica Dr
X Add			Fort Myers. FL 33919
Remove			19 SE
2) Change			
Add			
Remove			
3) Change		-	
Add			Öm 25
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			<u> </u>
Remove			

Attach additional sheets, if necessary). (Be specific)	
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f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	APR CRETA
provisions for implementing the angle it classification, or cancellation of issued shares,	SS = -
provisions for implementing the amendment if not contained in the amendment itself:	रमंे
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	MIN 25
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: date this document was signed.	_, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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" For a control of the co	16
(voting group)	≥
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	APR 15
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	AMIL 2
Dated 4-10-19	m on
Dated 1-10-19 Signature Sustanis S	_
(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)	
Michael Bur	
(Typed or printed name of person signing)	·
Chief Financial Officer	
(Title of person signing)	