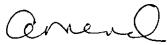
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### **COVER LETTER**

Division of Corpor					
NAME OF CORPORA	ATION: MJL CORP	•			
DOCUMENT NUMBER: P13000068933					
	f Amendment and fee are su				
Please return all correspondence concerning this matter to the following:					
1	MARIO E. JUARI	ΞZ			
_		Name of Contact Person	<u> </u>		
ACCOUNTING SOLUTIONS OF SWFL INC					
Firm/ Company					
1400 COLONIAL BLVD SUITE 253					
		Address			
<u>_</u>	FORT MYERS, F				
		City/ State and Zip Code	2		
mjuarez@accountingsolutionswfl.com					
	E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, please call:					
MARIO E JUA	AREZ.	at (239	, 938-0065		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fec	□\$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 Street Addre		Address			

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### **Articles of Amendment** to Articles of Incorporation of

FILED

2013 NOV 18 PM 2: 44

## MJL CORP

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

nent(s) to

(Document Number of Corporation	ı (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the following a	
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation	r "Co". A professional corporation name must cor	
B. Enter new principal office address, if applicable:	12713-4 MCGREGOR BLVD	
(Principal office address MUST BE A STREET ADDRESS)	FORT MYERS, FL 33919	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12713-4 MCGREGOR BLVD	
	FORT MYERS, FL 33919	
(Walling uturess MAT BE A POST OFFICE BOX)	FORT MYERS, FL 33919	
(Mauing undress MAT BE A POST OFFICE BOX)	FORT MYERS, FL 33919	
(Matting duaress MAT BE A POST OFFICE BOX)	FORT MYERS, FL 33919	
D. If amending the registered agent and/or registered office as	ddress in Florida, enter the name of the	
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addr	ddress in Florida, enter the name of the	
D. If amending the registered agent and/or registered office as	ddress in Florida, enter the name of the	
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addr Name of New Registered Agent	ddress in Florida, enter the name of the	
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addr Name of New Registered Agent	ddress in Florida, enter the name of the ess:	

# 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>РТ</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add Remove			
2) Change			
Add			
Change Add			
Remove			
4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
AMENDING ARTICLE II ADDING A NEW PRINCIPAL PLACE OF BUSINESS AND
NEW MAILING AS FOLLOW:
NEW ADDRESS 12713-4 MCGREGOR BLVD. FORT MYERS FL 33919
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate $N/A$ )
NONE

The date of each amendment	(s) adoption: NOVEMBER 12TH 2013	, if other than the
date this document was signed		
Effective date if applicable:	EFFECTIVE DATE NOVEMBER 1ST, 2013	
interior care in apprecione.	(no more than 90 days after amendment file date)	<u> </u>
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wes by the shareholders was/wes	re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_NO'	VEMBER 12TH, 2013	_
	By A director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
a	ppointed fiduciary by that fiduciary)	
	LILLIANA P. HERNANDEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	