(Re	equestor's Name)	
(Ad	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
·		
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
'		· ·
	J. HORN	
	SEP 21	2022

Office Use Only



300394488473

09/21/22--01001--007 **85.00

RECEIVED

2022 SEP 20 AH 9: 30

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

				
MP 3530 CORP				
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
			1	Art. of Amend. File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
			✓	Photo Copy
				Certificate of Good Standing
			<u></u>	Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
		!		Fictitious Search
Signature				Fictitious Owner Search
5				Vehicle Search
				Driving Record
Requested by: BA	00/10/22			UCC 1 or 3 File
Name	$\frac{09/19/22}{Date}$	Time		UCC 11 Search
INATHE	Date	THIC		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier
• • • • • • •			ī.	

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MP 3530 CORP			
DOCUMENT NUM	BER: P13000069928		<u> </u>	
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	itter to the following:		
	Louis A. Supraski			
		Name of Contact Person	1	
	Louis A. Supraski, P.A.			
		Firm/ Company		
	16666 NE 19th Ave Suite 11	3		
		Address		
	North Miami Beach, FL 3316	52		
		City/ State and Zip Cod	e	
	supraski@supraskilaw.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, plea	se call:		
Louis A. Supraski		at (³⁰⁵	792-0060 de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

F!1 ED 2022 SEP 20 AM 9: 30

MP 3530 CORP

(Name of Corporati	ion as currently filed with the F	lorida Dept. of State) com	
P13000069928		,,,,,	•
(Docur	nent Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Co.	rporation adopts the following a	mendment(s) to
A. If amending name, enter the new name of the co	orporation:		
name must be distinguishable and contain the word "co"Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A professional con	orporated" or the abbreviation '	he new 'Corp.," he word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADI			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, en office address:	ter the name of the	
Name of New Registered Agent			
· -	(Florida street address)		
New Registered Office Address:		, Florida	
	(Ciţy)	(Zip Code	e)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istored Agent: I am familiar with and accept the	obligations of the position.	
	at Van Burtan III	-1	
Signa	ature of New Registered Agent, if	changing	
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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.

Example:

X Change	<u>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>\$V</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
1) Change	P	Alan Kirschberg	2980 NE 207th St			
X Add			Suite 405			
Remove			Aventura, FL 33180			
2) Change						
Add						
X Remove	P	Joel Kirschberg	2980 NE 207th St			
3)Change	-		Suite 405			
Add			Aventura, FL 33180			
Remove			- Table			
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change		-				
Add			1777			
Remove						

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)							

					,		
 ·							
<u>_</u>			_ 				
			· · ·				
							
							
							
		···					
					 -		

f an amanda	nent provides for	an archanaa	realessifiantis	n or concell	stion of icense	d sharai	
provisions f	or implementing t	the amendme	nt if not conta	ined in the ar	nendment its	elf:	
(if not a	pplicable, indicate	N/A)					
				· · · ·			<u>-</u>
		<u>.</u>	<u> </u>				
							
				<u> </u>	<u> </u>		
			,,				

•

The date of each am date this document w	endment(s) adoption:, if other than as signed.
Effective date <u>if app</u>	licable:
	(no more than 90 days after amendment file date)
	erted in this block does not meet the applicable statutory filing requirements, this date will not be listed as date on the Department of State's records.
Adoption of Amend	ment(s) (CHECK ONE)
☐ The amendment(s' action was not req) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder uired.
) was/were adopted by the shareholders. The number of votes east for the amendment(s) rs was/were sufficient for approval.
) was/were approved by the shareholders through voting groups. The following statement by provided for each voting group entitled to vote separately on the amendment(s):
"The numbe	r of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
Dat	nature de aux SEPTEMBER 19, 2022
Sig	·*
	(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)
	ALAN KIRSCHBERG (Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

the

the