P14000015072

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R. HUNT 10/06/23

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MAD ACCOUNTANTS AND TAX SERVICE INC						
DOCUMENT NUMBER: P14000015072						
The enclosed Articles	The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corres	pondence concerning this ma	tter to the following:				
	JANICE COLE					
,		Name of Contact Person	1			
	M A D ACCOUNTANTS AND TAX SERVICE INC					
	Firm/ Company 604 NEW BERLIN RD UNIT 6					
	Address					
_	JACKSONVILLE FL 32218					
-		City/ State and Zip Code				
	COUNTINGMAD@GMAIL.COM					
-	E-mail address; (to be us	ed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:at (314 9446			
Name o	f Contact Person	at (Area Coc	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made j		•			
■ \$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		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303			

SLENCIARY OF SIMILARY DIVISION OF CORPORATIONS

Articles of Amendment to Articles of Incorporation of

	of			
M A D ACCOUNTANTS AND TAX SERVICE INC				
(Name of Corporation as	currently filed with the Florid	a Dept. of State)		
P14000015072				
(Document	Number of Corporation (if knows	1)		
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corpora	tion adopts the following	g amendmen	ıt(s) to
A. If amending name, enter the new name of the corpo	ration:			
M A D ACCOUNTING AND TAX SERVICE INC			The new	
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp." "Inc.," or "chartered," "professional association," or the abbreviati B. Enter new principal office address, if applicable:	"Co". A professional corpora	rated" or the abbreviatio tion name must contain	- n "Corp.," 1 the word	
(Principal office address MUST BE A STREET ADDRES	<u></u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			2023 OCT -6 PM	DIVISION OF CORPORT
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in Florida, enter t e address:	he name of the	12: 40	ATOR
Name of New Registered Agent				
	Florida street address)	<u> </u>		
New Registered Office Address:		, Florida		
	(City)	(Zip C	ode)	

New Registered Agent's Signature, if changing Registered Agent:

1 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)

Remove

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.

Frample:

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
A d d			
Remove			
2) Change			
Add			202
Remove 3) Change			2023 OCT
Add			
Remove			P
4) Change			6 PH 12: 40
Add			•
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

PIANT OF COMPANY OF STATE OF S

The date of each amendment(s) addate this document was signed.	option:	, if other than the
10/0. Effective date <u>if applicable:</u>	/2023	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this artment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado action was not required.	ted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were adopty the shareholders was/were sufficiently.	ted by the shareholders. The number of votes east for the amendme licient for approval.	ent(s)
☐ The amendment(s) was/were appromust be separately provided for a	oved by the shareholders through voting groups. The following statach voting group entitled to vote separately on the amendment(s):	ement
	or the amendment(s) was/were sufficient for approval	0;∀ 203
hy	(voting group)	n vision of c 2023 OCT -6
	(voting group)	
Dated	10-3-23	-6 PM12: 40
Signature	True Cole	
selected	etor, president or other officer – if directors or officers have not be by an incorporator – if in the hands of a receiver, trustee, or other of I fiduciary by that fiduciary)	en 6 %
J	ANICE COLE	
-	(Typed or printed name of person signing)	
1	RESIDENT	
-	(Title of nerson signing)	