## DH000022741

(Re	questor's Name)	
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(Do	cument Number)	
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

AME OF CORPORATION: MG Eugineering Consulting Sorvices his	-
OCUMENT NUMBER: P14000022741	
he enclosed Articles of Amendment and fee are submitted for filing.	
lease return all correspondence concerning this matter to the following:	
Max Frueria	
Name of Contact Person	
MG EUGINCETIUS Firm/ Company	
3640 19+4 Ave SW	
Address	
Naples FC 34117 City/ State and Zip Code	
City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
Max Juewa at (237) 595 5465  Name of Contact Person Area Code & Daytime Telephone Number	
inclosed is a check for the following amount made payable to the Florida Department of State:	
/	
\$35 Filing Fee	
Mailing Address Street Address	
Amendment Section Amendment Section Division of Corporations Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee	
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

P14 0000 7	on as currently filed with the F	iorida Dept. of State)	
(Docum	nent Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Florida is Articles of Incorporation:	Statutes, this <i>Florida Profit Co</i>	rporation adopts the fo	llowing amendment(s)
s. If amending name, enter the new name of the co	orporation:		
	<u>.                                  </u>		The new
ame 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 co	orporated" or the abbr rporation name must (	eviation "Corp.," contain the word
B. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>			
Enter new mailing address, if applicable:	<b>1</b>		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	<u> </u>	* *
		<del></del>	
). If amending the registered agent and/or register	red office address in Florida, er	nter the name of the	_
new registered agent and/or the new registered			
Name of New Registered Agent			<del></del>
- <u></u>	(Florida street address)		<del></del>
	(1 IDITAL SIVEET WALL COS)		
New Registered Office Address:	[1 Ibrida Sireer address)	, Florida	

Check if applicable

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

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>	<u>Name</u>	<u>Addres</u> s
1) Change	PΤ	GUERRA, MAXIMO A	3640 19TH AVE SW
Add			NAPLES, FL 34117
X Remove			3640 19TH AVE SW
2) Change	PT	MAX A GUERRA	NAPLES, FL 34117
X Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			-
6) Change			
Add			
Remove			

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an amendment pr	ovides for an excha	ange, reclassifica	tion, or cancella	ition of issued s	hares.	
rovisions for impl	lementing the amer le, indicate N/A)	ndment if not con	itained in the ar	nendment itself	<u>:-</u>	
(4) approxim	,,					
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The date of each amendment(s) adoption:, if other that date this document was signed.
Effective date if applicable:
(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 not be listed a document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ 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"  (voting group)
(voting group)
Dated $12187/2020$
Signature  (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)
(Typed or printed name of person signing)
Typed of printed finds of person signing)  U & C S i Cle u  (Title of person signing)
√ (Title of person signing)

