P14000051380

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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

Amend

JUL 1 2 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section **Division of Corporations**

TAME OF CORPORATION: MCD INTERIOR SERVICES INC
OCUMENT NUMBER: <u>714 00005 7380</u>
he enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
MCD INTERIOR STRUICTS TANG
MCD INTERIOR SERVICES INC Firm/Company 3848 COCOPLUM CIR
Address COCONUT CREEK FL 33063 City/ State and Zip Code
E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call:
MAN (1) CASE SAS PATINO at (954) 825 - 1090 Name of Contact Person Area Code & Daytime Telephone Number
S35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

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MCD INTERIOR SERVICE	
(Name of Corporation as currently	y filed with the Florida Dept. of State)
P140000 57380	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FILED SECRETARY SEED FLORD
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent MANCO CAR	ESAS PATINO
3848 Coop (Florida stre	
New Registered Office Address: COONT Co	City) Florida 33063 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Ro	egistered 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 Doc 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:	ove, ana sauy s	omiu, 3v as an Aaa.	
X Change	<u>PT</u> <u>Jo</u>	ohn Doe	
X Remove	<u>V</u> <u>M</u>	like Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	DANIA DELARIVA	GNO ON 81 TER
Add Remove			NORTHLAUDERDALE FL 33068
2)Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
.	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	——————————————————————————————————————

The date of each amendment(s) adoption date this document was signed.	tion: 06 30 2018	, if other than the
Effective date <u>if applicable</u> :	06 30 2018 (no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory filing requirements tment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes cast for the amerient for approval.	ndment(s)
	red by the shareholders through voting groups. The following the voting group entitled to vote separately on the amendment	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action and sh	areholder
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder	older
Dated $\frac{6}{5}$	0/00/8	
Signature		
(By a directed, b	tor, president or other officer – if directors or officers have noy an incorporator – if in the hands of a receiver, trustee, or ot fiduciary by that fiduciary)	
_		
	(Typed or printed name of person signing)	
	PRESIDENT. (Title of person signing)	······································