## P15000135601

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	* #)
PICK-UP		MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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12/05/18--01007--017 ++35.00



C. GOLDEN DEC 1 0 2018

## COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: MIKE	me	INC
DOCUMENT NUMBER: PISCOOI35	61	

The enclosed Articles of Amendment and fee are submitted for filing.

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Please return all correspondence concerning this matter to the following:

A PESTAVO
Name of Contact Person
BSSN
Firm/ Company
4612 N. HIATUS Rd
Address
SUNVISE R 33351
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail addless: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Rame of Contact Person
 at (<u>954</u>) <u>578 - 6016</u>

 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

X S35 Filing Fee	□\$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)
	ling Address		Address ment Section
Divi	sion of Corporations	Divisio	n of Corporations
1	Box 6327 ihassee, FL 32314		Building xecutive Center Circle
			issee, FL 32301

	Articles of Amendment to Articles of Incorporation	FILED
MIKELE	Me Inc	2010 DEC -5 PM 3: 24
( <u>Name of Co</u> PISODOO/3	rporation as currently filed with the Florida	Dept. of State) ALLAHASSEE, FL
P[5000013	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this <i>Florida Profit Corporation</i>	on adopts the following amendment(s) to
A. If amending name, enter the new name of	of the corporation:	
	<u>plicable:</u>	
(, , , , , , , , , , , , , , , , , , ,		
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, enter the istered office address:	name of the
new registered agent and/or the new reg		
new registered agent and/or the new reg	<u>istered office address:</u>	

,

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)

.

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:

<u>X</u> Change	<u>T4</u>	<u>John Doe</u>				
X Remove	<u>V</u>	Mike Jones				
<u>X</u> Add	<u>sv</u>	Sally Smith				
<u>Type of Action</u> (Check One)	Title	Name			<u>Addres</u> s	
1) Change	PT	Maria	ELENA	HERNAN. DE	2 4468 N. Yawa Louderhill F	ars ITY Dr
Add					Louderhill A	3335/
<u> </u>						
2) Change						_
Add						_
Remove						_
3) Change						_
Add						_
Remove						-
-1) Change	- <u></u>	<u> </u>				
Add						_
Remove						_
5) Change			<u></u>			_
Add						_
Remove						_
6) Change						_
Add						_
Remove						_

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E. If amending or adding additional Arti	cles, enter change	(s) here:		
(Attach additional sheets, if necessary).	(Be specific)			
			·····	
			·····	
	·. <u>·</u> -	····	••••••••••••••••••••••••••••••••••••••	_
			····	
	<u> </u>	<u></u>		
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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)

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The date of each as date this document	mendment(s) adoption:, if othe
Effective date <u>if ap</u>	oplicable:
	nserted in this block does not meet the applicable statutory filing requirements, this date will not be liste date on the Department of State's records.
Adoption of Amen	dment(s) ( <u>CHECK ONE</u> )
	(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) lers was/were sufficient for approval.
	(s) was/were approved by the shareholders through voting groups. The following statement ely provided for each voting group entitled to vote separately on the amendment(s):
"The numb	per of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment	(s) was/were adopted by the board of directors without shareholder action and shareholder equired.
The amendment action was not re	(s) was/were adopted by the incorporators without shareholder action and shareholder equired.
	Dated ignature (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)
	MAVIA ELENA HENNANDEA (Typed or printed name of person signing)
	Dres Treasurer
	(Title of person signing)

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