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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: M1 5100 CORP.			
	BER: P15000019766			
	s of Amendment and fee are sub	omitted for filing.		
Please return all corre	espondence concerning this mat	ter to the following:		
	MIRNA A. BELTRE RIVAS			
	-	Name of Contact Person		
	M1 5100 CORP.			
		Firm/ Company		
	5100 LAKE WORTH ROAD			
		Address		
	GREENACRES, FL 33463			
	·	City/ State and Zip Code	<u> </u>	
	DOCUMENTS@IBSTAX.CO	OM.		
	-	ed for future annual report	notification)	
				۳. ۱
For further information	on concerning this matter, pleas	e call:		
MIRNA A. BELTRI	FRIVAS	561	434-2870	<u>.</u>
	of Contact Person	at () 434-2870 de & Daytime Telephone Number	
Name	Of Confact Person	Area Cor	de & Daytime Telephone Number	.a. .a. .a
Enclosed is a check f	or the following amount made p	payable to the Florida Depa	artment of State:	£.
S35 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)	·
<u>M:</u>	ailing Address	Street	Address	

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

	01
M1 5100 CORP.	
(Name of Corporation as c	currently filed with the Florida Dept. of State)
P15000019766	
(Document No	umber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statut ts Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corpora	tion:
N/A	The new
name must be distinguishable and contain the word "corpora, "Inc.," or Co.," or the designation "Corp," "Inc," or " "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS	N/A
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A
). If amending the registered agent and/or registered off new registered agent and/or the new registered office N/A	
Name of New Registered Agent	
	lorida street address)
New Registered Office Address:	. Florida - —

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

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Doc	
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	PRES	RAFAEL FLORES	12240 EAGLE TRACE BLVD.
Add			CORAL SPRINGS, FL 33071
X Remove			
2) Change	PSTD	MIRNA A. BELTRE RIVAS	711 SUNNY PINE WAY
X Add			APT#H-2
Remove 3.) Change			GREENACRES, FL 33415
Add			
Remove			
4) Change	-		
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Ramara			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
N/A		
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K. If up amandment provides for an avahance weekstimation are appealed in a figured share	. :	
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:		ا د ت
(if not applicable, indicate N/A)		
RECLASSIFICATION OF SHARES:		==
MIRNA A. BELTRE RIVAS - PSTD - 100 SHARES		
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•	01/01/2019	
The date of each amendard this document was significant.	nent(s) adoption:	if other than th
	01/01/2019	
Effective date <u>if applicab</u>	<u>le:</u> (no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this dat on the Department of State's records.	te will not be listed as th
Adoption of Amendment	(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was action was not required	/were adopted by the incorporators, or board of directors without shareholder actio	on and shareholder
	/were adopted by the shareholders. The number of votes cast for the amendment(s)/s/were sufficient for approval.	s)
must be separately pro	/were approved by the shareholders through voting groups. The following stateme wided for each voting group entitled to vote separately on the amendment(s): votes cast for the amendment(s) was/were sufficient for approval	ent
by	(voting group)	
Dated	e ensettereries	
Signatur	e ensetterior	
-	(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)	1.153.45.1
	MIRNA A. BELTRE RIVAS	1
	(Typed or printed name of person signing)	
	PRESIDENT	2:
	(Title of person signing)	: = 73