## P150000039985

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





300314160653

06/07/18--01009--018 \*\*35.00

2018 JUN -7 PN 1: 24
SECRETARY OF STATE
TALL AHASSEE, FLORIDA

Manie Chy

JUN 08 2018

I ALBRITTON

### **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

MABELYS MELTON, P.A. NAME OF CORPORATION: \_\_ P15000039985 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MABELYS D. MELTON Name of Contact Person MARELYS MELTON, P.A. Firm/ Company 3430 POINCIANA AVENUE Address M/AMI, FL 33/33 City/ State and Zip Code dustymetton@earthlink.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call; MABELYS D. MELTON at ( 305 ) 905 - 2400

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

### **Articles of Amendment** Articles of Incorporation

# MABELYS MELTON, P. A. (Name of Corporation as currently filed with the Florida Dept. of State) P/000039985 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

	The newThe new neorporated or the abbreviation
	corporation name must contain the
ldress in Florida, enter t	BECRE JARY OF STATE ORID OR name of the
<u>:ss:</u>	<b>&gt;</b>
street address)	
	The of As
(City)	, Florida
	ldress in Florida, enter t

## 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 <math>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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change			
Add			<del></del>
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			<del> </del>
4) Change			
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
<del>.</del>	
<u> </u>	
<del></del>	
······································	<del> </del>
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself;
(ij nen approame, mateue (v.s.)	

	JUNE 7, 2018	
The date of each amendment(s) adopt date this document was signed.	ion:	, if other than the
Effective date if applicable:	SAME	
- Apprense	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this oment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendment ent for approval.	i(s)
	ed by the shareholders through voting groups. The following states h voting group entitled to vote separately on the amendment(s):	neni
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and sharehold	der
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated JUNE Signature Make	4, 2018 by A Miller	
(By a direct selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other conductary by that fiduciary)	n urt
	MABELYS D. MELTON	
<del></del>	(Typed or printed name of person signing)	
	PRESIDENT	
<del></del>	(Title of person signing)	