## P15000078906

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MIDDLEBURG B	P INC				
DOCUMENT NUMF	BER: P15000078906					
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	VESNA BEGER					
		Name of Contact Persor	1			
	V & B ACCOUNTING SERVICES, INC					
		Firm/ Company	<del></del>			
	8825 PERIMETER PARK B					
		Address				
	JACKSONVILLE, FL 32216	•				
		City/ State and Zip Code	2			
	VANDBACC@GMAIL.COM	M				
	~	sed for future annual report	notification)			
For further informatio	n concerning this matter, pleas		422-6813			
	of Contact Person	at (904	de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:			
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

MIDDLEBURG BP INC

Check if applicable

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

2023 MOV 14 /// 7: 28

MIDDLEBUKG Br INC.		
(Name (	of Corporation as currently fi	iled with the Florida Dept. of State)
P15000078906		
	(Document Number of Co	orporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this <i>Flo</i>	orida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:	
		The new
name must he distinguishable and contain "Inc.," or Co.," or the designation "C" chartered," "professional association,"	Corp," "Inc," or "Co". A p.	npany," or "incorporated" or the abbreviation "Corp.," rofessional corporation name must contain the word
B. Enter new principal office address,	if applicable:	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )	
C. Enter new mailing address, if appl	icable:	
(Muiling address MAY BE A POST		
	- -	
D. If amending the registered agent ar		s in Florida, enter the name of the
new registered agent and/or the ne-		
Name of New Registered Agent	HARDIK PATEL	
	671 DRAKE BAY TERRACI	E
	(Florida street	address)
New Registered Office Address:	ST AUGUSTINE	, Florida 32084
	ıCi	ity) (Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:	to the second of
I hereby accept the appointment as regis	tered agent. Tam jamutar witi	h and accept the obligations of the position.
	,	
	HD. 1997	
- · · · · · · · · · · · · · · · · · · ·	Signaturé of New Regi	istered 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)

Example:

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 Doc			
X Remove	$\underline{V}$	Mike Jone	<u>s</u>		
X Add	<u>\$V</u>	Sally Smit	<u>h</u>		
Type of Action (Check One)	<u>Title</u>	2	tame	<u>Addres</u> s	
1) Change	Р	^	AVNIKABEN D PATEL	2935 PLUM ORCHARD DR	
Add				ORANGE PARK, FL 32073	
Remove 2) Change	P	<b>]</b> -	HARDIK PATEL	671 DRAKE BAY TERRACE	
X Add				ST AUGUSTINE, FL 32084	
Remove Change		<u> </u>			
Add					
Remove					
4) Change Add			<del></del>		
Remove					
5) Change					
Add					
Remove					
6) Change		<del></del> -	<del>P V</del>		
Add					
Remove					

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/4)	Attach additional sheets, if necessary).	(Be specific)
provisions for implementing the amendment if not contained in the amendment itself:		
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(if not applicable, indicate N/A)	provisions for implementing the ame	endment if not contained in the amendment itself:
	(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
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 requodocument's effective date on the Department of State's records.	juirements, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the incorporators, or board of directors without action was not required.	ut shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	or the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the acceptance.	
"The number of votes cast for the amendment(s) was/were sufficient for approva	ı <del>l</del>
by	
(voting group)	
11/04/2023 Dated	
Signature A.D. Patt	
(By a director, president or other officer – if directors or offic selected, by an incorporator – if in the hands of a receiver, truappointed fiduciary by that fiduciary)	
AVNIKABEN D PATEL	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)