

P15000095358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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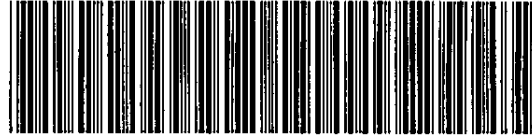
(Business Entity Name)

(Document Number)

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16 AUG 29 PM 9:55

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01-21-16

Since the name 1ST choice TAXES INC is unavailable
I would like to use N&M 1ST CHOICE TAXES ^{INC} ~~SERVICES~~

Please Feel Free to contact me at 754 366 7913
OR AT 6354 W OAKLAND SUNRISE 33313.

THANKS

16 AUG 15 PM 3:54

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: N & M TAX SERVICES INC

DOCUMENT NUMBER: 81-0738461 P15000095358

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

Please return all correspondence concerning this matter to the following:

NIXON RICHEL

Name of Contact Person

N & M TAX SERVICES INC

Firm/ Company

8354 W OAKLAND PARK

Address

SUNRISE FL 33313

City/ State and Zip Code

Ketline.laurent@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NIXON RICHEL

Name of Contact Person

at (754) 366-7913

Area Code & Daytime Telephone Number

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

☐ \$35 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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

AUG 29 11 09 AM '95

Articles of Amendment
to
Articles of Incorporation
of

N: M TAX SERVICES INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P15000095358

(Document Number of Corporation (if known))

16 AUG 29 AM 9:55

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

NSM 1ST CHOICE TAXES INC. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

6354 W OAKLAND
PARK, SUNRISE
FL 33313

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

6354 W OAKLAND
PARK, SUNRISE
FL 33313

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

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.

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>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>Change</u>	_____	_____	_____
<u>Add</u>			
<u>Remove</u>			_____
2) <u>Change</u>	_____	_____	_____
<u>Add</u>			_____
<u>Remove</u>			_____
3) <u>Change</u>	_____	_____	_____
<u>Add</u>			_____
<u>Remove</u>			_____
4) <u>Change</u>	_____	_____	_____
<u>Add</u>			_____
<u>Remove</u>			_____
5) <u>Change</u>	_____	_____	_____
<u>Add</u>			_____
<u>Remove</u>			_____
6) <u>Change</u>	_____	_____	_____
<u>Add</u>			_____
<u>Remove</u>			_____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

I would like you to help me change
N&M Tax Services inc. located at 6354
W OAKland Park To my Company best name
vsm 1st Choice Taxes INC. located at this
present address 6354 W OAKland Park
Sunrise FL 33313.

**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)

I would like you to help me exchange,
N&M Tax Services inc. located at
6354 W OAKland Park To my Company best
name N&M 1st Choice Taxes inc located at
this present address 6354 W OAKland Park
Sunrise, FL 33313.

The date of each amendment(s) adoption: 06/20/2016, if other than the date this document was signed.

Effective date if applicable: N/A
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by N/A
(voting group)"

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated _____

Signature _____

(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)

NIXON RICHEL
(Typed or printed name of person signing)

N/A
(Title of person signing)