Division of Corporations Electronic Filing Cover Sheet

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(((H160003041563)))



H160003041563ABC-

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To:

Division of Corporations

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From:

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Account Number : 120140000115

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Fax Number : (813)884-0263

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN MGL GLOBAL SERVICES INC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

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DEC 1 3 2016

C LEWIS

## COVER LETTER

TO: Amendment Sect Division of Corp					
NAME OF CORPOR	RATION: MGL GLOBAL SE	RVICES INC			
DOCUMENT NUM	BER: P16000010732				
The enclosed Articles	of Amendment and fee are sub	mitted for filing.			
Pleuse return all corre	spondence concerning this mat	er to the following:			
	MARCOS DAROSA				
		Name of Contact Person			
	MGL GLOBAL SERVICES				
		Firm/ Company			
	13141 CARROLLWOOD CR	EEK DR			
		Address			
	TAMPA FL 33624				
		City/ State and Zip Code	:		
D L/V	ASILVA@LIBERTYTAX.COM	,			
K177	<del>-</del>	ed for future annual report:	notification)		
	n-man address, (to be us	ed tot totore amous report.	ionication,		
For further information	on concerning this matter, pleas	e call:			
MARCOS DAROSA	<b>\</b>	pt ( <sup>R13</sup>	965-6512		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	for the following amount made p	payable to the Florida Depa	irtment 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)		
Ma	niling Address	Street	Address		
An	nendment Section	Amendment Section			
	vision of Corporations	Division of Corporations			
	D. Box 6327	Clifton Building 2661 Executive Center Circle			
la	linhassee, FL 32314	Tallahassee, FL 32301			

2016 DEC 12 AM 9: 24

## Articles of Amendment to Articles of Incorporation of

MGL GLOBAL SERVICES INC				
	ration as currently	filed with the Flor	ida Dept. of State)	)
P16000010732				
. (De	ocument Number of	Corporation (if know	MI)	
Pursuant to the provisions of section 607,1006, Flo ts Articles of Incorporation:	orida Statutes, this F	Iorida Profit Corpo	ration adopts the f	ollowing amendment(s) to
If amending name, enter the new name of the	e corporation:			
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Covord "chartered," "professional association," or	Corp. " "Inc, " or "C	o". A professiona	"incorporated" of I corporation name	The new the ubbreviation the must contain the
3. <u>Enter new principal office address, if applic</u> Principal office address <u>MUST BE A STREET</u>				<del></del>
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>: BOX</u> )			
D. It amending the registered agent and/or reg new registered agent and/or the new registe	istered office address:	ess in Florida, ente	r the name of the	
Name of New Registered Avent				
<del></del>	(Florida stre	et address)		
New Registered Office Address:			, Florida_	· · · · · · · · · · · · · · · · · · ·
	(1	Clty)		(Zip Code)
New Registered Agent's Signature, if changing hereby accept the appointment as registered age	<u>Registered Avent:</u> ent. I am familiar w	ith and accept the o	bligations of the po	sition.
	Signature of New Re	vistarel Avent if c	hanoina	

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 = ChiefExecutive 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	PT	John De	0.¢		
X Remove	<u>y</u> .	Mike Ja	oncs		·
_X Add	<u>sv</u>	Sally St	mith		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change	\$	_	jonisley dos suntos de paula		13141 carrollwood creek dr
X Add					tampa fl 33624
Remove					
2) Change				·	
Add					
Remove					
3)Change		<del></del>		<del></del>	
Add					
Remove					
4) Change				<u></u> .	
Add					
Remove					
5) Change		_	<u></u>		A 20 W
Add					
Remove					
6) Change		— <i>-</i> -		<u>-</u>	
Add					
Remove					

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an amendment proprovisions for imple (if not applicable	s, indicate N/A)		· · · · · · · · · · · · · · · · · · ·		
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SECRETARY OF STATE MYISTON OF CORPURATION

The date of each amendment(s) adoption:	2016 DEC	12	AM 9:	24	, if other than the
date this document was signed.	•				
Effective date if applicable:					
(no more thu	n 90 dayx after amendmen	t file d	ate)		
Note: If the date inserted in this block does not meet the application document's effective date on the Department of State's records		quiren	icnts, this	date wi	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)					
The amendment(s) was/were adopted by the shareholders, 'by the shareholders was/were sufficient for approval.	The number of votes cast f	or the	amendme	nt(s)	
☐ The amendment(s) was/were approved by the shareholders a must be separately provided for each voting group entitled				ement	
"The number of votes cast for the amendment(s) was/	were sufficient for approve	d			
by(voling group)		``			
(voling group)					
☐ The amendment(s) was/were adopted by the board of direct action was not required.	ors without shareholder ac	tion a	nd shareho	older	
☐ The amendment(s) was/were adopted by the incorporators vaction was not required.	vithout shareholder action	and sh	nreholder		
12/12/2016					
Dated	<del></del>				
Signature × Munda Can					
(By a director, president or other of selected, by an incorporator – if is appointed fiduciary by that liduciary	the hands of a receiver, to				
7	ну)				
MARCOS DAROSA					
(Typed or print	ed name of person signing	()			
PRESIDENT					
(Ti	tle of person signing)				