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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
		MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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C. CARROTHERS

07/27/16--01003--004 **87.50



INC. P.O. 1	236 East 6th Avenue. Tallahassee, Florida 32303 Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666	
	JOX 57000 (32515-7000) ~ (630) 222-2000 UF (600) 909-1000, FAX (650) 222-1000	
	WALK IN	
	PICK UP: $\frac{7}{27}$	
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COVER LETTER

TO: Amendment Section

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Division of Corporations

NAME OF CORPORATION:	/	MCD	WIL	SON	I, INC.
DOCUMENT NUMBER:	P	16	0000	45	544

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

Please return all correspondence concerning this matter to the following:

 J.B. deRosset
Name of Contact Person
 Law offices of J.B. J. Rosset
Firm/ Company
 9085 SW 87th Avenue, Suite 201
Address
 Miami FL 33176
City/ State and Zip Code
 elg 5311 @ gmail.com
E waited by March and Conference 1 and 12

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

For further information concerning this matter, please call:

J.B. deRosset at (<u>305</u>) <u>279-7955</u> 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:



S43.75 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

Articles of Amendment to			
Articles of Incorporation of			
MCD WILSON, INC.			
(Name of Corporation as currently filed with the Florida Dept. of State)	•		
P 16 0000 45 544			
(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607,1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the fo its Articles of Incorporation:	ollowing	amend	lment(
A. If amending name, enter the new name of the corporation:			
WILSON 17890, INC, name must be distinguishable and contain the word "corporation," "company," or "incorporated" of		The a	ww
B. Enter new principal office address, if applicable:			
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		(*)	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	TALLA PASS	2814 JUL 27	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	SECHENARY OF TALLAMASSTELF	2815 JUL 27 AM	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	SECREMARY OF STATE	2516 JUL 27 AM 4:00	
(Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) D. If amending the registered agent and/or registered office address in Florida, enter the name of the	TALL APASS E. FLORIES		
(Principal office address <u>MUST BE A STREET ADDRESS</u>) C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>) D. <u>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:</u>	TALLAPASS E.F.ORIES		
(Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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)	TALLA MASS E.F.LORIEA	4:00	
(Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) 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	TALLA PASSELF LORIES	4:00	

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:

John Doe

Mike Jones

<u>Name</u>

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.

Address

Example:

<u>X</u>Change

 \underline{X} Remove \underline{V}

<u>_X</u> Add <u>SV Sally Smith</u>

<u>PT</u>

Title

Type of Action (Check One)

Check (Me)

Change

_____ Add

_____ Remove

2) ____ Change

_____ Add

Remove

3) ____ Change

_____ Add

Remove

4) ____ Change

____ Add

_____ Remove

5) ____ Change

_____ Add

_____ Remove

δ) ____ Change

Add

Remove

amending or adding additional Articles, enter change(s) here: . Attach additional sheets, if necessary). (Be specific)						
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provisions	<u>dment provides fo</u> <u>s for implementing</u> applicable, indica.	g the amendment i	<u>classification, or</u> if not contained	cancellation of is in the amendment	<u>sued shares.</u> itself:	
·····		αμαροφικά το ματορογιατικό θε ^ο τόντατα από που το χρηγοριός του με τη πορογια		er ver seg af 1967 / Wei anværende gegener mit kan skyr og forserer en som		
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Affective date if applicable:	(no more than 90 days after amendment file datc)
Note: If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes east for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement r each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	
	(voting group)
The amendment(s) was/were ac action was not required.	topied by the board of directors without shareholder action and shareholder
The amendment(s) was/were ac action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated 7	/26/16
Signature	126/16 Geord Gerena
(Hy a select	director, president or other officer if directors or officers have not been ed, by an incorporator if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Edgard Gerena (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
·	(Title of person signing)

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Page 4 of 4

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