P17000046462

(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	TD GREEN MII	LE 74, INC.		
DOCUMENT NUMBER:	P17000046462			
The enclosed Articles of Amend	<i>ment</i> and fee are su	bmitted for filing.		
Please return all correspondence	concerning this ma	tter to the following:		
DELGER	SANDZHIEVA			
 		Name of Contact Person	1	
TD GREI	EN MILE 74, INC.			
		Firm/ Company	,	
19390 CC	LLINS AVE 120			
,-	····	Address	<u></u>	
SUNNY I	SLES BEACH, FL	. 33160		
	-	City/ State and Zip Code	2	
			a stiffmation)	
n-ma	m address: (to be u	sed for future annual report	notification)	
و مر م	.1.1	11		
For further information concerni	ng this matter, plea:	se call:		
		(1	
Name of Contact	Person	Area Co)de & Daytime Telephone Number	
			CC	
Enclosed is a check for the follow	wing amount made	payable to the Florida Depa	irtment of State:	
	3.75 Filing Fee & rtificate 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 Clitton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

TD GREEN MILE 74, INC.				
(Name o	f Corporation as currently	filed with the Florida Dept. of State)	
P17000046462		_		
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Fl</i>	orida Profit Corporation adopts the f	ollowing amer	idment(s
A. If amending name, enter the new na	me of the corporation:			
			The	naw
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Ce	σ'' . A professional corporation name	r the abbrevie	ation
B. Enter new principal office address,	if applicable:		<u> </u>	
(Principal office address MUST BE A S	TREET ADDRESS)			
			- 第二	_ <u>ii</u>
			<u> </u>	
C. Enter new mailing address, if appli				Ö
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			70 to 60	_
			33	
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the name of the		
	DELGER SANDZHIEVA			
Name of New Registered Agent		179		
	dri et			
	(Florida stree	t aaaress)		
New Registered Office Address:		, Florida, Florida	(Zip Code)	
	10	,	(24) (044)	
New Registered Agent's Signature, if cl				
I hereby accept the appointment as regist	ered agent. I am familiar wii	th and accept the obligations of the po	sition.	
	, Ť	0		
	l'ang mue	69		
	Signature of New Res	sistered 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) X Change	P	DELGER SANDZHIEVA	19390 COLLINS AVE APT 120
Add			SUNNY ISLES BEACH FL 33160
Remove			
2) Change	VP	SANAL MUKABENOV	19390 COLLINS AVE APT 120
X Add			SUNNY ISLES BEACH FL 33160
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additiona	adding additional Ar il sheets, if necessary)					
-						
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f an amendmen	nt provides for an exc	change, reclassifi	ication, or cane	ellation of issue	i shares,	
provisions for i	implementing the am	iendment if not e	ontained in the	amendment its	elf:	
(у посарра	icable, indicate N/A)					
· · · · · · · · · · · · · · · · · · ·					-	_
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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)	
(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, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	nreholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
JUNE 14, 2017 Dated	
Signature Caregranela	
(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary)	
DELGER SANDZHIEVA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	