Taylor Seay 8004323622

Help



Florida Department of State **Division** of Corporations **Electronic Filing Cover Sheet**

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August 24, 2020

FLORIDA DEPARTMENT OF STATE Division of Corporations

MY-CIERGE, INC. 111 NE 1ST STREET, 8TH FLOOR, #337 MIAMI, FL 33132US

SUBJECT: MY-CIERGE, INC. REF: P18000007841

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

We cannot have 2 corporations with the same or similar name even with consent. Please choose a different name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

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FAX Aud. #: H20000288030 Letter Number: 720A00016186



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Articles of Amendment to Articles of Incorporation of

MY-CIERGE, INC.

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

P18000007841

(Document Number of Corporation (if known)

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:

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_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:	111 NE 1st Street	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Bth Floor, #337	
	Miami, FL 33132	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	111 NE 1st Street	
(),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	8th Floor, #337	
	Miami, FL 33132	
	<u>ddress in Florida, enter the name of the</u>	
new registered agent and/or the new registered office addr		_
Name of New Registered Agent		-
Name of New Registered Agent	street address)	
Name of New Registered Agent	street address)	- Code)

Signature of New Registered Agent, if changing

Check if applicable

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

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)

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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:

Example: <u>X</u> Change	<u> 14</u>	John Doe	
X Remove	Y	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			<u> </u>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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

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

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)

date this document was signed. Effective date <u>if applicable:</u> (no more than 90 days after unrendment 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 incorporators, or board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) 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):	The date of each amendment(s) adoption:	, if other than the
(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 incorporators, or board of directors without shareholder action and shareholder action was not required. 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	date this document was signed.	
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Dated	(i	poting group)
(Typed or printed name of person signing)	Signature (By a director, pr selected, by an in	esident or other officer – if directors or officers have not been norporator – if in the hands of a receiver, trustee, or other court
	Samella	i Watson
Director		(Typed or printed name of person signing)
	Director	
(Title of person signing)		(Title of person signing)

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