P18000043303

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

Midway Approusal Services DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: OLITOR BLVD. SOFIA. SIAZ @ SISTSVCS. COME-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

	of ^
_ Midway Appraisal Serv	as currently filed with the Florida Dept. of State)
Name of Corporation	as currently filed with the Florida Dept. of State)
P180000 43303	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
	The new
	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word attion "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)
	(-)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	i Constitution of the cons
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 off	<u>lice address:</u>
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	ered Agent:
I hereby accept the appointment as registered agent. I a	um familiar with and accept the obligations of the position.
Signatu	re of New Registered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 60%	7.0120 (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)

Example:

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.

<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Juan C. Biaz	30320 SW 155th AVE
Add			Humestead, FL 33033
Remove	/		70:10
2) Change		Sofia R. Diaz	734 Centenary Logs
V Add			Apt. 206
Remove Change			Lake Mary, FL. 32746
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			12-11-
6) Change			
Add			
Remove			

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• • •		•	-			
an amendment provide provisions for implement (if not applicable, inc	nting the amendmen	reclassifica nt if not con	tion, or cancel tained in the a	lation of issue imendment its	<u>l shares,</u> elf:	
G Fr .	NA		· · · · · · · · · · · · · · · · · · ·	···		
						
		,				
						
						

The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date if applicable:	
(no more than 90 days afte	r amendment file date)
Note: If the date inserted in this block does not meet the applicable statut document's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of di action was not required.	rectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	f votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficier	nt for approval
by(voting group)	
(voting group)	
Dated 10/05/2020	
Signature (By a director, president or other officer – if director, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	
Andrew W. Naz (Typed or printed name of pe	
President	
(Title of person signing)	

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