P18000067897

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MAI PREFERRE	ED PROPERTIES	
DOCUMENT NUMBER: P18000067897		
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
DAVE MENZEL		
	Name of Contact Perso	n
	Firm/ Company	
395 STAN DRIVE SUITE	В	
MELBOURNE, FL 32904	Address	
	City/ State and Zip Cod	e
dmenzel@maidesignbuild.com		
E-mail address: (to be	used for future annual report	notification)
For further information concerning this matter, ple-	ase call:	
DAVE MENZEL	at (³²¹	863-2809
Name of Contact Person	Area Code & Daytime Telephone Numb	
Enclosed is a check for the following amount made	e payable to the Florida Depa	iriment of State:
\$35 Filing Fee \$\text{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)
Amendment Section Amendr Division of Corporations Division P.O. Box 6327 Clifton		Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MAI PREFERRED PROPERTIES		
(Name of Corporation	on as currently filed with the Flo	orida Dept. of State)
P18000067897		2019 HAY 23 A II: 80
(Досшт	nent Number of Corporation (if kno	own)
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this <i>Florida Profit Corp</i>	oration adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the wor. "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the	" "Inc," or "Co". A profession	"incorporated" or the abbreviation al corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	i DRFSS)	
MOST BE ASTRICT ABB	<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)	
		
D. If amending the registered agent and/or register new registered agent and/or the new registered of the new	ed office address in Florida, ente office address:	er the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi	stered Agent:	
hereby accept the appointment as registered agent.	l am familiar with and accept the a	obligations of the position.

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:

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: XChange	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	VP	HORNE. MELISSA	395 STAN DRIVE SUITE B	
Add X Remove			MELBOURNE, FL 32904	
2) Change	VP	SUCHOSKI. MATTHEW P	395 STAN DRIVE SUITE B	
Add			MELBOURNE, FL 32904	
X Remove				
3) Change		···		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)	_		
7	- <u> </u>			
			77.	· <u>-</u>
			, 	
				·
				-
			<u></u>	
		·		
an amendment provides for an exchaporovisions for implementing the amen (if not applicable, indicate N/A)	nge, reclassification, or dment if not contained	cancellation of in the amendme	issued shares, nt itself:	
		-		
				
				

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)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	I 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 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	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated May 21 2019 Signature (By a director, president or other officer – if directors or officers have not been	_
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Dave Henrel	
(Typed or printed name of person signing)	
Praident	
(Title of person signing)	
(Title of person signing)	