P18000091806

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COVER LETTER

Division of Corporation	us .
NAME OF CORPORATION	DN: Melrose Pub Inc. 7180000 91806
DOCUMENT NUMBER:	P 180000 91806
The enclosed Articles of Am	nendment and fee are submitted for filing.
Please return all corresponde	ence concerning this matter to the following:
	Bryanna Thomas Name of Contact Person Me/rose Pub Inc. Firm/ Company 698 SR 21 Address Me/rose, FL 32666 City/ State and Zip Code bryanna/ynn 440 ao/.com E-mail address: (to be used for future annual report notification)
1	E-mail address: (to be used for future annual report notification)
For further information conc	terming this matter, please call:
Bryani Dame of Con	ntact Person at 386 983-3366 and Area Code & Daytime Telephone Number
Enclosed is a check for the f	ollowing amount made payable to the Florida Department of State:
\$35 Filing Fee C	S43.75 Filing Fee & S2.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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	•	
Melrose Pab I	- - <i>D</i>	
(Name of Corporation as currently f	iled with the Florida Dept. of Sta	te)
P180000 9180	26	
(Document Number of Co	orporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flu</i> its Articles of Incorporation:	orida Profit Corporation adopts the	: following amendment(s) to
A. If amending name, enter the new name of the corporation:	WB	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	". A professional corporation na	or the abbreviation
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	w/n	<u> </u>
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent Name of New Registered Agent	s in Florida, enter the name of the	64 2: 52 50: 51 NG 50: 51 NG 50: 51 NG 50: 51 NG
SR	address)	
New Registered Office Address: Me/10Se	.FL Florida	32666 (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the 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: 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	Name	<u>Addres</u> s
1) Change	\mathcal{P}	Willie Robinson	1871 SE But Rie.
Add Remove			1371 SE Jand Rue. Gaines VI //e, FL 3264,
2) Change	\mathcal{P}	Bryanna Thomas	
_X Add			Melrose, FL 32666
Remove 3) Change		Jennifer Coleman	698 SR 21
<u></u> ★ Add			Me/rose FL 32666
Remove			
4) Change	·		
Add			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach <i>additional sheets</i>	additional Artics, if necessary).	(Be specific)	Nα			
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an amendment prov provisions for implem	ides for an exch lenting the ame	ange, rectassindment if not	contained in th	icenation of issue	itself:	
(if not applicable,					<u> </u>	
		NA				
		/V P -			_	
_						
-						

The date of each amendment(s) adoption):	, if other than the
late this document was signed. Effective date if applicable:	Fobrem / 2019	
sitetive date ii applicable.	(no more than 1) days after amendment file date)	
Note: If the date inserted in this block d document's effective date on the Departme	oes not meet the applicable statutory filing requirements, this ent of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficien	y the shareholders. The number of votes east for the amendment for approval.	ent(s)
· · · · · · · · · · · · · · · · · · ·	by the shareholders through voting groups. The following state of the group entitled to vote separately on the amendment(s):	tement
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopted b action was not required.	y the board of directors without shareholder action and shareholder	older
☐ The amendment(s) was/were adopted b action was not required.	y the incorporators without shareholder action and shareholder	г
-	9-19	
Signature 4 R	2	
(By a director	, president or other officer - if directors or officers have not be	een
•	n incorporator – if in the hands of a receiver, trustee, or other outliary by that fiduciary)	court
	Bryanna Thoma	as
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	