## P1900000 3357

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MAITLAND	& ASSOCIATES, INC			
DOCUMENT NUMB	ER: <u>P19000003357</u>				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	oondence concerning this ma	tter to the following:			
-	· · · · · · · · · · · · · · · · · · ·	KINGSLEY MAITLA! Name of Contact Perso			
		Name of Contact Perso	п		
_	M/	AITLAND & ASSOCIATE	S, INC.		
		Firm/ Company			
_	1 FLORIDA PARK DRIVE S. STE 214				
	Address				
	PALM COAST, FL 32137				
-	City/ State and Zip Code				
For further information	E-mail address: (to be us	naitland@maitland-epa.com sed for future annual report se call:	notification)		
	MAITLAND				
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
<b>⊠</b> \$35 Filing Fee	□\$43.75 Filing Fee & 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)		
	ing Address indment Section		Address Iment Section		

Division of Corporations

2661 Executive Center Circle Tallahassee. FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment to Articles of Incorporation of

MAITLAND & AS	SCOIATES, INC.
(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P190000033	357
	r of Corporation (if known)
	nis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	
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 = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treusurer, 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 Doc. 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	. same or or or			
<u> </u>	ARTICLE V	111		
NAME O	F AUTHORIZED C	OFFICER/DIREC	CTOR IS:	
	<del> </del>			
<del></del>	KINGSLEY MAIT	LAND	<del></del>	- "
				<del></del>
				<del></del>
		<del></del>		
				<u> </u>
<del></del>				
n amendment provides for an exc	hange, reclassificati	on, or cancellatio	n of issued shares,	
ovisions for implementing the am (if not applicable, indicate N/A)	endment if not conta	ained in the amen	dment itsell:	
· — · —				
	<del> </del>			

The date of each amendment(s) adoption: _date this document was signed.	February 25, 2019	if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file	edate)
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing require of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	HECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the approval.	e amendment(s)
	the shareholders through voting groups. The foliog group entitled to vote separately on the amer	
	endment(s) was/were sufficient for approval	
by	ooting group)	
	oting group)	
action was not required.	te board of directors without shareholder action are incorporators without shareholder action and	
Dated February 26, 20	19	
Signature		
	esident or other officer – if directors or officers	have not been
	corporator - if in the hands of a receiver, trusted	
appointed fiducia	ry by that fiduciary)	
	Kingsley Maitland	
	(Typed or printed name of person signing)	
	_President	
	(Title of person signing)	