Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000128503 3)))



H240001285033ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:			124 124 124
	Division of Co	rporations	
	Fax Number	: (850)617-6380	APR APR
			2550 1
From:			<u> </u>
	Account Name	: SORSHER & ASSOCIATES, LLC.	inj ⇔ 25≥ Ed.,./
	Account Number	: I20170000056	
	Phone	: (954)842-2931	<u> </u>
	Fax Number	: (954)842-2936	On
		•	ori o
			37

## COR AMND/RESTATE/CORRECT OR O/D RESIGN MCULAI, INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

Electronic Filing Menu

Email Address:

Corporate Filing Menu

Help

## COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MCULAI, INC.					
	BER: P19000017709					
	of Amendment and fee are s	submitted for filing.				
Please return all corre	spondence concerning this m	latter to the following:				
	CULAI, MIHAIL					
	Name of Contact Person					
	APPLIANCES REPAIR MO	CULAI, INC.				
	Firm/ Company 319 NE 14TH AVE APT 505					
		Address	•			
	HALLANDALE BEACH, F	L 33009				
		City/ State and Zip Coo	le			
	MR.CULAIMIHAI@GMAI					
	E-mail address: (to be u	sed for future annual report	notification)			
For further information	n concerning this matter, plea		696.4010			
Name o	of Contact Person	at (786				
	the following amount made		de & Daytime Telephone Number artment of State:			
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Pee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303			

## Articles of Amendment to . Articles of Incorporation of

FILED

2024 APR -8 AM 11: 40

MCULAI, INC.			ì	2024 APR -8 AF
(Name of Corpo	ration as currently	filed with the Florida D	ept. of State)	
P19000017709			1,	ALLAHASSEE. A
(Do	cument Number of (	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Flo its Articles of Incorporation:	rida Statutes, this FI	orida Profit Corporation	adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of the	e corporation:			
APPLIANCES REPAIR MCULAI, INC.				
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp." "In "chartered," "professional association," or the ab	ac or to a i	mpany," or "incorporate professional corporation	d" or the abbrevia name must cont	The new stion "Corp.," ain the word
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	<u>ble:</u> DDRESS)			<u> </u>
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE I</u>	B <u>OX</u> )			
D. If amending the registered agent and/or registered new registered agent and/or the new registere	tered office addres: ed office address:	in Florida, enter the n	ame of the	
Name of New Registered Agent			<del></del>	_
	(Florida street	oddress)		<del>-</del>
New Registered Office Address:			_, Florida	
	(Cit	y)		Code)
lew Registered Agent's Signature, if changing Rehereby accept the appointment as registered agent.  Sign	I am familiar wuh	and accept the obligatio	ns of the position.	·
heck if applicable		torous Agent, if changing		
meen ii appiicabie				

☐ 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)

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	PŢ	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
l) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add		· ——•	
Remove			
5) Change			
Add			
Remove			
n Change			
Add		<del></del> _	
Remove			

	lding additional Art sheets, if necessary).	(Be specific)	_		
					<del></del>
				<u> </u>	
		<del></del>			
<del></del>			<del>-</del>		
	-	- <u>-</u>		*	
<del></del>					
					<del>-</del>
				<del></del>	<del></del>
		<u> </u>			
			· · · · · · · · · · · · · · · · · · ·		
an amendment pr	rovides for an excha	inge, reclassificat	ion, or cancellati	on of irrued sha	
A A A SIA DA A A B B B B B B B B B B B B B B B B	Comaning ing Awen	dment if not con	tained in the ame	ndment itself:	(A)
1.6	ie, indicate N/A)				
(if not applicable					
(if not applicable					
(if not applicabl					
(if not applicab.					
(if not applicab.					
(if not applicab.					
(if not applicab.					
(if not applicab.					
(if not applicab.					
(if not applicab.					
(if not applicab.					

.

. .

The date of each amendment(s date this document was signed.	adoption:		, if other than th
Effective date if applicable:			
	(no more than 90 day.	s after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable : Department of State's records.	statutory filing requirements, this	date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were action was not required.	dopted by the incorporators, or board	of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The numl sufficient for approval.	per of votes cast for the amendmen	t(s)
must be separately provided y	pproved by the shareholders through war each voting group entitled to vote set for the amendment(s) was/were suff	eparately on the amendment(s):	TALLANIASSEE FLORIT
	(voting group)		ASSEE
04/08/20 Dated			
Signature	Mihail Culai		5 <b>0</b>
(By a select	director, president or other officer - if ed, by an incorporator - if in the hands nted fiduciary by that fiduciary)	directors or officers have not been s of a receiver, trustee, or other cou	nt .
	CULAI, MIHAIL		
	(Typed or printed name o	f person signing)	
	PRESIDENT	- <b>-</b>	
	(Title of person signing)		