P190000 33912

Requestor's Name)				
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WAIT MAIL				
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Certificates of Status				
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MA LEWELT

COVER LETTER

TO: Amendment Section Division of Corporations

MG LABORDE LAND AQU	 SITION, INC
NAME OF CORPORATION:	
P19000033912 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for	 Sling.
Please return all correspondence concerning this matter to the fo	 llowing:
GERDA LJEAN	
Name of MG LABORDE LAND AQUISITION,	Contact Person NC
Firm 1311 E OAK STREET	/ Company
ARCADIA, FL 34266	Address
City/ Stat	e and Zip Code
dadou7@hotmail.com	·
E-mail address: (to be used for future	annual report notification)
For further information concerning this matter, please call:	
GERDA L JEAN	941 204-0745 st ()
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the	e Florida Department of State:
Certificate of Status Certifie	nal copy is Certified Copy
Mailing Address 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

MG LABORDE LAND AQUISITION, INC

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(Name of Corporation as cur	rently filed with the Florida Dept. of State)
P19000033912	THE PART IS IN
(Document Num	ber of Corporation (if known)
	TALL AWAIS STANK
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporation	 n:
MG LABORDE LAND ACQUISITION, INC	<u></u>
	The new
	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the ion "P.A."
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)	
(musing statess may be a tost of the box)	4-7
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 office add	
N CN D I	
Name of New Registered Agent	1
(Flori	da street address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A	
I hereby accept the appointment as registered agent. I am fami	nar with and accept the obligations of the position.
	
Signature of N	w 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 Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jones			
_X Add	_ <u>sv</u>	Sally Sn			
		<u>oung</u> on			A J.J
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change					
Add					
Remove					
2) Change					
Add					
Remove					<u> </u>
3) Change		_			
Add					
Remove					
4) Change				!	
Add		_			
Remove					
5) Change					 · · ·
Add					
Remove					
6) Change		_			
Add					
Remove					

If amending or adding additional Articles, enter change Attach additional sheets, if necessary). (Be specific)	· · · · · · · · · · · · · · · · · · ·
Attach dadinonal sheets, if hecessary). (De specific)	
· ·	
	
If an amendment provides for an exchange, reclassification	tion, or cancellation of issued shares,
provisions for implementing the amendment if not con	tained in the amendment itself:
(if not applicable, indicate N/A)	

• 1	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
date this document was signed.	
Effective date if applicable:	
	an 90 days after amendment file date)
Note: If the date inserted in this block does not meet the a document's effective date on the Department of State's record	applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitle	
"The number of votes cast for the amendment(s) was	s/were sufficient for approval
by	
by(voting group)	
The amendment(s) was/were adopted by the board of direct action was not required.	ctors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators action was not required. May 7th, 2019	without shareholder action and shareholder
Signature Leader, Le	
	officer – if directors or officers have not been in the hands of a receiver, trustee, or other court ciary)
(Typed or prin	nted name of person signing)
	Title of person signing)