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COVER LETTER

TO: Amendment Section Division of Corporations

NOE MALCA

NAME OF CORPORATION: <u>MEGAN B CORP.</u>

Tallahassee, FL 32314

DOCUMENT NUMBER: P19000066073

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ORTIZ, CARLA Name of Contact Person Firm/ Company 10840 DENNINGTON RD Address FORT MYERS, FL 33913 City/ State and Zip Code malcatax@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (239_____) 810-8998 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

MEGAN B CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

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P19000066073

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006. Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or "Co". A professional corporation name must contain the word "chartered." "professional association " or the abbreviation "P A ".
B. Enter new principal office address, if applicable:

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С.	Enter new mailing address, if applicable:
	(Mailing address MAY BE A POST OFFICE BOX)

(Principal office address MUST BE A STREET ADDRESS)

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 address:

Name of New Registered Agent		<u></u>
	(Florida street address)	
<u>New Registered Office Address:</u>		, Florida
	(City)	(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

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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; \hat{V} = Vice President; \hat{T} = Treasurer; \hat{S} = Sccretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; (FO = 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:

Example: <u>X</u> Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
()Change	VP	KEVIN MORALES	3700 LIBRA DR	
X Add			ORLANDO FL 32816	
Remove				
2) Change				
Add				
Remove				
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51 Change			<u>_</u>	
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Attach additional sheets, if necessary).	(Be specific)
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If an amendment provides for an each	nange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
,	<u>.</u>
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· · · · ·		
	10/07/2020	
The date of each amendment date this document was signed		, if other than the
	10/07/2020	
Effective date <u>if applicable</u> :		,
	(no more than 90 days after amendment file a	late)
	this block does not meet the applicable statutory filing requirement of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	re adopted by the incorporators, or board of directors without sha	archolder action and shareholder
The amendment(s) was/were by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the ere sufficient for approval.	: amendment(s)
	re approved by the shareholders through voting groups. The foll red for each voting group entitled to vote separately on the amena	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by		
<i></i>	(voting group)	
st	/2020 y a director, president or other officer – if directors or officers h. dected, by an incorporator – if in the hands of a receiver, trustee, ppointed-fiduciary by that fiduciary) CARLA ORTIZ	

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(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)