PA000058963

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Business Endty Name)
(Document Number)
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Special Instructions to Filing Officer:
Recieved
corrections on
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SECRETARY (- STATE TALLAHASSEE, FL



July 11, 2025

MARCUS MOORE

CRAN STRAND DR WINTER PARK, FL 32792 US

SUBJECT: MASTERMIND MOBILE MECHANIC SERVICES INC.

Ref. Number: P20000058963

We have received your document for MASTERMIND MOBILE MECHANIC SERVICES INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check one of the adoption of amendment boxes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett Regulatory Specialist II Letter Number: 625A00015089

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: MASTERMIND N	10BILE MECHANIC SER	VICES INC.			
DOCUMENT NUM	P20000058963					
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all corr	respondence concerning this ma	tter to the following:				
	Marcus Moore					
	Name of Contact Person					
Firm/ Company						
3096 Crane Strand Dr						
	Address					
	Winter Park, FL 32792					
	City/ State and Zip Code		:			
	moore.marcus76@yahoo.com			SECI TAI	2925	
	E-mail address: (to be us	ed for future annual report	notification)	WI W	2925 JUL 22	
For further informati	ion concerning this matter, pleas	se call:		ETALLI CH S LAHLI SHE,	22 h	
Marcus Moore		407 at (486-9865	7 - 7 0.	AH 8: 10	i
Name	e of Contact Person		ic & Daytime Telephone Number		6	
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:	•••		
\$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)			
	ailing Address mendment Section		Address ment Section			

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

				o .	T
Mastern	nind	Mobile	Mechanic	Services	inc

Mastermind Mobile Mechanic Services inc		
(Name of Corporation as current)	ly filed with the Florida Dept. of State)	
P20000058963		
(Document Number o	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the folk	owing amendment(s) (
A. If amending name, enter the new name of the corporation:		
Mastermind - Incredible Inc		The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A."	A projessional corporation name musi co	viation "Corp.," ontain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NR	
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 add	Iress in Florida, enter the name of the	SECRETAL OF TAULAH ASSE
new registered agent and/or the new registered office address	<u>5.</u>	- : : : : : : : : : : : : : : : : : : :
Name of New Registered Agent		—, ATE
(FL. '1	reet address)	
.i.		
New Registered Office Address: NA	, Florida (City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the posit	ion.
Signature of New F	Registered Agent, if changing	
Check if applicable		

☐ 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)

Example:

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.

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	Address
1) Change		NA	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			F A S: 6
Remove			
4) Change			
Add			J. C. D.
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
NA		_	
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If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	ri.	Ū	
(if not applicable, indicate N/A)			
NA		-	
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	05/07/2025	if other than th
The date of each amendment(s) ad	option:	
date this document was signed.	•	
	7/2025	
Effective date if applicable:	(no more than 90 days after amendment)	ile date)
Note: If the date inserted in this bi document's effective date on the De	ock does not meet the applicable standary filing requestrent of State's records.	pirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was were ado action was not required.	pted by the incorporators, or board of directors withou	shareholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for fficient for approval.	the amendment(s)
The emendment(s) was/were app must be separately provided for	noved by the shareholders through voting groups. The each voting group extitled to vote separately on the an	following statement sendment(i):
The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(naged thank)	•
05/07 <i>/</i> 2023	i.	
Dated		V)
school	incior, proidest or other officer – if directors or officer d, by an incorporater – if in the backs of a receiver, one and fiduciary by that fiduciary)	n have out been are, or other court
	Матом Мост	
	(Typed or primal came of person signing)	
	Out Porth Ason	
	(Tick et banco eterral)	

SECRETARY OF STATE TALLAHASSEE, FL

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