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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Mayon Enterprises, Inc. DOCUMENT NUMBER: P20000066269 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Angela Minefee Name of Contact Person Law 4 Small Business, P.C. Firm/ Company 320 Gold Ave SW, Suite 620 Address Albuquerque, NM 87102 City/ State and Zip Code MERILEE@KERNCOMMUNICATIONS.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Angela Minefee Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** 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

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## 'Articles of Amendment to Articles of Incorporation of

Mayvn Enterprises, Inc.			
(Name o	f Corporation as curi	rently filed with the Florida Dept. of State)	
P2000066269			
	(Document Numb	per of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes,	this Florida Profit Corporation adopts the following	ig amendment(s) to
A. If amending name, enter the new na	ame of the corporation	<u>n:</u>	
Mavyn Enterprises, Inc.			The new
	Corp, " "Inc, " or "Co"	n," "company," or "incorporated" or the abbreviati ". A professional corporation name must contain P.A."	on "Corp.,"
B. Enter new principal office address, (Principal office address MUST BE A S			<del></del>
			20.
			<del></del> _
C. Enter new mailing address, if appli			
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX		<del>`_</del>
		<del></del>	<del></del>
			. ·
D. It amending the registered agent an new registered agent and/or the new		address in Florida, enter the name of the dress:	<del>_</del>
Name of New Registered Agent	JR Nations		
	6934 NW 126th Ave		<b>-</b>
	(Florid	da street address)	_
New Registered Office Address:	Parkland,	, Florida 33076	
negistered office vicares.			('ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	tered agent. I am fami	egent:  iliar with and accept the obligations of the position.  lew Registered Agent, if changing	_
Check if applicable	4		
The amendment(s) is/are being filed p	ursuant 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove 3 ) Remove			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Rumova			

f amending or adding additional A attach <i>additional sheets, if necessary</i>	). (Be specific)
······································	
	share realization or arrealisting of issued shares
rangicions for implementing the gr	schange, reclassification, or cancellation of issued shares.  mendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nendment ti not contained in the amendment usen.
ι σ του τρητικού του	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
<b>Note:</b> If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, t partment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amend fficient for approval.	ment(s)
	roved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s,	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
Dated09/11/20	20	
Signature	Meriler a-Korn	<u> </u>
selecte	rector, president or other officer – if directors or officers have not d, by an incorporator – if in the hands of a receiver, trustee, or othe ed fiduciary by that fiduciary)	
	Merilee A. Kern	
	(Typed or printed name of person signing)	
	Director	
	(Title of person ciupina)	<del></del>