P20000074136

Office Use Only



500382731525

05/07/01 - 13 3 -- 15 ** 55.69

2022 MAR - 7 AH II: 16 SECRETARY OF STA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: THE MCLEISH EXPR	ESS INC			
DOCUMENT NUMBE	R: P20000074136				
The enclosed Articles of	Amendment and fee are sul	omitted for filing.			
Please return all corresp	ondence concerning this mat	ter to the following	g:		
	Sonia Becerra				
_	Name of Contact Person				
	Swyft Filings				
_	Firm/ Company				
	3 Greenway Plaza #1320				
_	Address				
	Houston, TX 77046				
_		City/ State and I	Zip Code		
		themcleishexpress	inc@amai	Loom	
_	E-mail address: (to be us				
	concerning this matter, pleas		877	777-0450	
Name of Contact Person		at (Area Cod	le & Daytime Telephone Number	
Enclosed is a check for t	the following amount made p	payable to the Flor	ida Depa	rtment of State:	
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Copy (Additional copenclosed)	;	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amen Divisi P.O. 1:	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314		Amenda Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303	

Articles of Amendment to Articles of Incorporation

2022 MAR -7 AM 11: 16 of

(Normal of Commonstices)		
(Name of Corporation)	as currently filed with the Florid	la Dept. of State)
	P20000074136	1/455/200 00 10 10 10 10 10 10 10 10 10 10 10 1
Decument	t Number of Corporation (if knows	n)
(1 A)Cuttient	. Number of Corporation (if know)	·;
ursuant to the provisions of section 607,1006, Florida Sta s Articles of Incorporation:	atutes, this Florida Profit Corpora	ation adopts the following amendment(s)
If amending name, enter the new name of the corpo	oration:	
		The new
ame must be distinguishable and contain the word "corpo Inc.," or Co.," or the designation "Corp," "Inc," or chartered," "professional association," or the abbrevia	r "Co". A professional corpore	rated" or the abbreviation "Corp.,"
Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDRE</u>	<u>.:SS</u>)	
	-	
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		
in the state of th	ee is total .	u cu
 If amending the registered agent and/or registered new registered agent and/or the new registered offi 		the name of the
The state of the s		
Name of New Registered Agent		
	(Florida street address)	
	(Florida street address)	
New Registered Office Address:	(Florida straet address) (City)	, Florida

Check if applicable

 \Box 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 Doc, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT Joh	ın l kie	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
_X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>VP</u>	SHEYNA JACKSON	5475 WILES RD
Add			COCONUT CREEK, FL 33073
X Remove			SL=> 02/17/2022
2) Change		·	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

				· · · · · · · · · · · · · · · · · · ·	.
		<u> </u>			
					
		.			
		· · · · · · · · · · · · · · · · · · ·	·		
	·				
				<u> </u>	
-					
		• • •			
			=		
an amendment provides for an excl	ianoe reelassifica	tion or cancellar	ion of issued sh	ires.	
rovisions for implementing the ame	ndment if not con	tained in the am	endment itself:		
(if not applicable, indicate N/A)					
					
				· · · · · · · · · · · · · · · · · · ·	
	•		-		
	•				
			,		
	•				

The date of each amendment(s) adoption date this document was signed.	n: <u>2/15/2022</u>	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departme	oes not meet the applicable statutory filing requirements, tent of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted b action was not required.	y the incorporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were adopted b by the shareholders was/were sufficien	y the shareholders. The number of votes cast for the amend t for approval.	ment(s)
	by the shareholders through voting groups. The following so toting group entitled to vote separately on the amendment(s)	
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated 02/17	12027	
Signature	president or other officer – if directors or officers have not	L
selected, by a	president or other officer – if directors or officers have not a incorporator – if in the hands of a receiver, trustee, or othe iciary by that fiduciary)	
	(Typed/or printed name of person signing)	
	(1 ypec, or primed name or person signing)	
	(Title of person signing)	