P20000083061

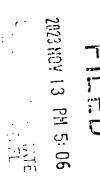
(Red	questor's Name)	
(Add	iress)	
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(City	//State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
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A. BUTLER DEC - 4 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: MIAMI PROFESS	IONAL BROKERS & MU	ULTI SERVICES INC	
	MBER: P20000083061			
	es of Amendment and fee are su	bmitted for filing.		
Please return all cor	respondence concerning this ma	tter to the following:		
	GRETTEL WILSON			
		Name of Contact Person	1	
	MIAMI PROFESSIONAL M	ULTISERVICES		
		Firm/ Company		
	22733 SW 131 PL			
		Address	<u> </u>	
	MIAMI, FL 33170			
		City/ State and Zip Cod	2	
	GRETTEL.WILSON@YAH	DO COM		
	-	ed for future annual report	notification)	
For further informat	ion concerning this matter, pleas	se call; 786 at (955-5835	
Nam	e of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made p	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations		Street Address Amendment Section Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

MIAMI PROFESSIONAL BROKERS & MULTI SERVICES INC

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name of Corporation	as currently filed with the Florida Dept. of State)	TT PA
P20000083061	\$.	
(Document	Number of Corporation (il'known)	
Pursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the follow	ring amendmen
A. If amending name, enter the new name of the corpo	oration:	
MIAMI PROFESSIONAL MULTISERVICES INC		The new
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc.," o "chartered." "professional association," or the abbrevia	r "Co". A professional corporation name must con-	ition "Corp"
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>:SS</u>)	···
		
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	office address in Florida, enter the name of the ce address:	
N/A		
Name of New Registered Agent		
-	(Florida street address)	
	rrioriau sirect address)	
New Registered Office Address:	, Florida, City)	
	(City) (2)	p Code)
New Registered Agent's Signature, if changing Registe	red Agent:	
hereby accept the appointment as registered agent. Lan	n familiar with and accept the obligations of the position	1.
Signatur	c of New 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	PT	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>	Address
1) N/A Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	_		
Remove			

(Attach aaa)	litional sheets, if	necessary).	(Be specific))			
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lf an amen	dment provides	s for an exch	ange, reclassi	ification, or ca	ncellation of is:	sued shares.	
provisions	s for implement	ing the amer	ndment if not	contained in t	he aniendment	itself:	
(if not	applicable, indi	cate N/A)	<u></u>				
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The date of each amendment		if other than the
date this document was signed		
Effective date <u>if applicable</u> :	11/01/2023	
	(no more than 90 days after amendment file de	nte)
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory tiling requirenthe Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without share	reholder action and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes east for the ere sufficient for approval.	amendment(s)
☐ The amendment(s) was/wei must be separately provide	re approved by the shareholders through voting groups. The followd for each voting group entitled to vote separately on the amenda	wing statement nent(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
11/01/	2023	
Dated		
	O-La	
Signature	y a director, president or other officer - if directors or officers ha	
(છ	lected, by an incorporator – if in the hands of a receiver, trustee,	ve not been or other court
ap	pointed fiduciary by that fiduciary)	or Circle Court
	GRETTEL WILSON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	