## P21000068569

(Re	equestor's Name)	
(Ad	ldress)	
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## COVER LETTER . . .

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: M.L.B. & ASSOCI	IATES, INC.	
	MBER: P21000068569	<del>-</del>	
	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Michael L. Brusca Jr.		
		Name of Contact Person	1
	M.L.B. & ASSOCIATES, IN	C.	
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
	1()4-244		
		Address	
	WINTER GARDEN, FL. 347	787	
	****	City/ State and Zip Cod	·
	mike@mlbandassoc.com	ed for future annual report	a stiff pari sas
	1man agaress, no be us	ed to future annual report	normeacony
For further informat	ion concerning this matter, pleas	se call:	
Michael L. Brusca .	fr.	941	387-6419
Nam	e of Contact Person	Area Co	) 387-6419 de & Daytime Telephone Number
Enclosed is a check	for the following amount made [	payable to the Florida Depa	artment of State:
S35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address 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 of

M.L.B. & ASSOCIATES, INC.

(Name of Corpora	tion as currently	filed with the Florida Der	ot. of State)	
P21000068569				
(Docu	ument Number of (	Corporation (if known)		
Pursuant to the provisions of section 607,1006, Floridits Articles of Incorporation:	da Statutes, this $F$	lorida Profit Corporation v	dopts the following a	mendment(s) t
A. If amending name, enter the new name of the	corporation:			
MICHAEL L BRUSCA & ASSOCIATES INC				$h_{\mathcal{C}} = n_{\mathcal{C}W}$
name must be distinguishable and contain the word " "bic," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abb	Cor "Co" A	mpany," or "incorporated professional corporation i	or the abbreviation 'aune must contain to	Corp ," he word
B. Enter new principal office address, if applicab (Principal office address <u>MUST BE A STREET AL</u>	<u>ole:</u> DDRESS )			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	3 <u>0X</u> 1			
D. If amending the registered agent and/or regist- new registered agent and/or the new registered		ss in Florida, enter the na	me of the	
Name of New Registered Agent				
				~-3
	(Florida stree	t address)		~ ) 
New Registered Office Address:	16	iny)	_, Florida	: er
			·	(S
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	egistered Agent: I am familiar wi	th and accept the obligation	is of the position.	r'' \$: 22
<del></del>		· · · · · · · · · · · · · · · · · · ·		
Ng	nature of New Rey	gistered 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)

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: XChange	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Joi		
X Add	<u>SV</u>	<u>Sally Sn</u>	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
21 Change	<del></del>	<del></del>		
Add				
Remove 3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

	ng additional Arti rets, if necessary)	(Be specific)			
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	ovides for an exch	vange reclassificat	ion or cancellation	of issued shares	
lf an amendment pro	ementing the ame	ndment if not cont	ained in the ameno	lment itself:	
<u>lf an amendment pro</u> provisions for imple					
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f an amendment pro- provisions for imple (if not applicable	e, indicate NA)				
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. . . .

The date of each amendment(s) ad date this document was signed.	loption: 8/1/21	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del> </del>
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date wi	II not be fisted 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 without shareholder action an	d shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s). Theirent for approval.	
	roved by the shareholders through voting groups. The following statement vach voting group entitled to vote separately on the amendments:	
"The number of votes cast t	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	7.0 7.0 7.7
08/01/2021 Dated		्रा स्क
Signature		·~•
selected	rector, president or other officer—if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Michael L. Brusca Jr.	. 0
-	(Typed or printed name of person signing)	· ·
	President	

(Title of person signing)