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COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: King 3	of Junk C	ARS, Inc.	
DOCUMENT NUMBER: P2100	००४०३५४		
The enclosed Articles of Amendment and fee are sub	omitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
SAN	rantha Al	WAREZ_	
	Name of Contact Person		
	Firm/ Company	1 1 2	
1050	South CA	melo+ cir 33328	
	AVILE FL	33378	
	City/ State and Zip Code		
dee 1	8702@g	mail.com	
17-man address: (to be us	ed for future annual report	поинсацоп)	
For further information concerning this matter, pleas	se call:		
Sauantha Alvare	2 at 305	305-9373	
Name of Contact Person	Area Coc	le & Daytime Telephone Number	
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:	
\$35 Filing Fee \$\times \text{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		<u>Address</u>	
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327		n of Corporations entre of Tallahassee	
Tallahassee, FL 32314		I. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment

to Articles of Incorporation

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•	Articles of incorporation	
· · · · · · · · · · · · · · · · · · ·	ng of Junic Cars, poration as currently filed with the Florida Dept.	In2022 NOV 2 0
(Name of Cor	poration as currently filed with the Florida Dept.	of State)
		TALT COTATE
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation ado	opts the following amendment(s) to
A. If amending name, enter the new name of		
Medin	aste Managnent	Inc. The new
name must be distinguishable and contain the w "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	ord "corporation," "company," or "incorporated" o "Inc," or "Co". A professional corporation nai e abbreviation "P.A."	r the abbreviation "Corp.," me must contain the word
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)		
D. If amending the registered agent and/or new registered agent and/or the new regis	registered office address in Florida, enter the name stered office address:	e of the
Name of New Registered Agent		
	-	
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Lip Code)
New Registered Office Address:		Florida(Lip Code)
New Registered Agent's Signature, if changing in the Interest of the Agent's Signature, if changing is the Interest of the Int	ng Registered Agent: igent. I am familiar with and accept the obligations	of the position.
	Signature of New 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)

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 Doc	
_			
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			_
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary)	
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an amendment provides for an excl	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	tridirect trave contained in the amendment user.
	

•

The date of each amendment(s) adoption	on:, if other than t
date this document was signed.	
Effective date if applicable:	11.19.22
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Departm	does not meet the applicable statutory filing requirements, this date will not be listed as the nent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast for the amendment(s) ent for approval.
	d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for th	ne amendment(s) was/were sufficient for approval
hy	· · · · · · · · · · · · · · · · · · ·
	(voling group)
• •	
Dated	9.77
Signature	
(By a directo selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)
	Samantha Alvarez
	(Typed or printed name of person signing)
	Président
 -	(Title of person signing)