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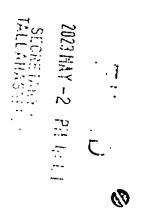
(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(,			
(Document Number)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
J. HORNE			
JUL 1 3 2023			
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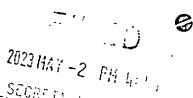


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MLJ AUTOMOTI	VE CONSULTING INC			
DOCUMENT NUMI					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	VICTOR VERDI PA				
		Name of Contact Person	n		
	VERDI ASSOCIATES GROUP INC				
		Firm/ Company			
	9900 WEST SAMPLE ROAL	D SUITE 255			
		Address			
	CORAL SPRINGS, FLORID	DA 33065			
	·	City/ State and Zip Cod	e e		
	vicverdi@comeast.net				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:	829 8397		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	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)		
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Division The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of



to

MLI AUTOMOTIVE CONSULTING INC

(Name of Corporation	on as currently filed with the Florida Dept: of State)
P22000048336	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the co	orporation:
MLJ RETIREMENT SOLUTIONS LLC	The new
	orporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable	::
(Principal office uddress <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO.	<u>(X)</u>
D. If amending the registered agent and/or register	red office address in Florida, enter the name of the
new registered agent and/or the new registered of	
Name of New Registered Agent	
Same of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
N D : 4 1 A 2 C	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	ustered Agent: I am familiar with and accept the obligations of the position.
and the second s	· · · · · · · · · · · · · · · · · · ·
Signa	ature 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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<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				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	
N/A		
		
		•
-		
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
N/A		
		
	•	

The date of each amendment(s) a	adoption:	if other than the
date this document was signed.		
Effective date if applicable:		
,	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	lopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	t
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	,··	
	(voting group)	
Dated	4/28/23 Miland Johnson	
selecti	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	MICHAEL L JOHNSON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	