## P23000024653

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: JESAL DEVELOP	MENT CORP	
DOCUMENT NUME	D23000024653		<del></del>
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	DAVID DE JESUS		
	Dirid	Name of Contact Persor	
	·	Firm/ Company	
	5710 Sheridan St.		
	<del></del>	Address	
	Hollywood FL 33021		_
		City/ State and Zip Code	•
	info@mdxconstruction.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Elvys de Jesus		at (	387-5860 de & Daytime Telephone Number
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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 Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to Articles of Incorporation of

JESAL DEVELOPMENT CORP

FILED

to

(Name of Corporation	n as currently	filed with the Florida D	ept260State)	- ta <sub>n</sub> 1_1
P23000024653			- व्यापास्य । ९	P. A.H. 7:57
(Docume	nt Number of	Corporation (if known)		17.55
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this F	Slorida Profit Corporation	adopts the follow	ving amendment(
A. If amending name, enter the new name of the cor	poration:			
JESAL PRIVATE PROVIDER SERVICES CORP				T1
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	or "Co". A	ompany," or "incorporated professional corporation	d" or the abbrevio name must con	The new ation "Corp.," tain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		NA		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		NA		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of				
Name of New Registered Agent — — — — — — — — — — — — — — — — — — —	<del>                                     </del>			<del></del>
	451			<del></del>
	(Florida stre	et adaress)		
New Registered Office Address:	<del></del>	City)	Florida	ip (ode)
	,	Cnyı	ix	ц (оае)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I to		ith and accept the obligati	ons of the positio	n.
Signati	ure of New Re	gistered Agent, if changing		
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 60	·			

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.

<u>X</u> Change	<u>PT</u>	John Doe			
X Remove	$\underline{V}$	Mike Jones	$N/\kappa$		
X Add	<u>sv</u>	Sally Smith	, (		
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		<del>-</del>			
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					-

ttach additional sheets, if necessary). (Be specific	()
	$\mathcal{N} \setminus \mathcal{P}$
	<del></del>
<del></del>	<del></del>
<del></del>	<del> </del>
·	
an amendment provides for an exchange, reclass	
rovisions for implementing the amendment if not (if not applicable, indicate N/A)	of contained in the amendment itself:
(ij noi appucame, maicule 1878)	$\omega/\kappa$
	1 12 11
	<del>-</del>
	<del></del> .

The date of each amendment(s) adoption:late this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
(no more than 90 days a	ter amendment file date)
Note: If the date inserted in this block does not meet the applicable sta document's effective date on the Department of State's records.	autory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of action was not required.	directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The numbe by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vot must be separately provided for each voting group entitled to vote separately provided.	
"The number of votes cast for the amendment(s) was/were suffic	ent for approval
by	··
(voting group)	
Dated 3 14 24	
Signature Don't Do Jen	
(By a director, president or other officer – if d selected, by an incorporator – if in the hands appointed fiduciary by that fiduciary)	
DAVID DE J	
(Typed or printed name of	person signing)
President	
(Title of person signing)	