Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : WE TAXES AND MORE INC.

Account Number : I20200000043 : (772)879-0010 Fax Number : (772)281-5520

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN MACU SERVICES INC

Certificate of Status	1
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Page Count	06
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

COVER LETTER

TO: Amendment Se Division of Co					
NAME OF CORP	ORATION: MACU SERVICE	S INC			
	MBER: P23000036922				
The enclosed Article	es of Amendment and fee are su	bmitt ed for filing.			
Please return all cor	respondence concerning this ma	tter to the following:			
	MARIA VIRGINIA IRAZAI	BAL			
		Name of Contact Perso	on	•	
	MACU SERVICES INC				
		Firm/ Company		•	
	8930 A SANSHOT COURT				
		Address			20
	PORT ST LUCIE FL 34986			<u>v</u> .	24
	 	City/ State and Zip Coo	le	•	Ē
	macudesinguy@gmail.com			::	42
	E-mail address: (to be us	sed for future annual repor	t notification)	• • • • • • • • • • • • • • • • • • •	ĄK
For further informat	ion concerning this matter, pleas	se call:		.n. 	2024 JUN 24 AM 11: 01
MARIA VIRGINIA	\ IRAZABAL	at (⁵⁶¹) 5286736		
Nam	e of Contact Person	Area Co	ode & Daytime Telephone Numbe	r	
Enclosed is a check	for the following amount made	payable to the Florida Dep	partment of State:		
□ \$35 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)		
A. Di	iailing Address mendment Section ivision of Corporations O. Box 6327	Amen Divisi	Address dment Section on of Corporations Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

3

Articles of Amendment to

	i	ncorporation If		
MACU SERVICES INC	·	•		
(Name	of Corporation as curren	tly filed with the Florida Dept, of State)	
P23000036922)			
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 60 its Articles of Incorporation:	7.1006, Florida Statutes, this	s Florida Profit Corporation adopts the f	ollowing amend	lm e nt(s) to
A. If amending name, enter the new ;	name of the corporation:			
	·		The n	iew
inc., or Co., or the designation "	'Corp." "Inc." or "Co".	A professional corneration name must	reviation "Corp contain the wo	o.," ord
B. Enter new principal office address	if applicable:	8930 A SANSHOT COURT		
(Name of Corporation as curred) P23000036922 (Document Number Parsuant to the provisions of section 607.1006, Florida Statutes, the staticles of Incorporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: A. If amending name, enter the new name of the corporation: B. Enter new principal office address MUST BE A STREET ADDRESS A. If applicable: Principal office address MUST BE A STREET ADDRESS A. Enter new malling address MUST BE A STREET ADDRESS A. If amending the registered agent and/or registered office address new registered office address MARIA VIRGINIA IR. 8930 SANSHOT COUR (Florida New Registered Office Address: PORT ST LUCIE Signature of New Signature of New Signature of New	PORT ST LUCIE FL 34986		_	
	i .			,202
C. Enter new malling address, if app (Mailing address MAY BE A POST	licable: OFFICE BOX	8930 A SANSHOT COURT		2 Kiir 1,202
	i	PORT ST LUCIE FL 34986	in	124 4
	;			
D. If omending the registered agent a new registered agent and/or the ne	nd/or registered office add w registered office addres	iress in Florida, enter the name of the s:	٢	2
Name of New Registered Agent	MARIA VIRGINIA IRAZ	ZABAL		
	8930 SANSHOT COURT	•		
	(Florida street address)			
New Registered Office Address:	PORT ST LUCIE Florida		4986	
		(Cloy)	(Zip Code)	-
New Registered Agent's Signature, if c	changing Registered Agent	t;		
I hereby accept the appointment as regis	tered agent. I am familiar	with and accept the obligations of the pos	sition.	
	Cfr.	~		
	Signature of New R	Registered Agent, if changing		
Check if applicable				
	oursuant 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$⊻</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	OSCAR ZAPATA	70 CAMINO DEL RIO
Add			PORT ST LUCIE FL 34952
X Remove		1	ZDZ4 JUN Z4
2) Change		· · · · · · · · · · · · · · · · · · ·	- Z
Add		*	S
Remove 3) Change			17 EX 17 17 17 17 17 17 17 17 17 17 17 17 17
Add		;	1
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			***************************************
Remove			
6) Change		_!	
Add			
Remove			

If amending or adding additional Arti- (Attach additional sheets, if necessary).	(Be specific)		
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	1	<u>·</u>	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,		
provisions for implementing the ame (if not applicable, indicate N/A)	adment if not contained in the amendment itself:		
(i) not appacable, indicate N/A)			

Jun 24, 2024 10:42 (UTC-04) From: +17722815520 (Walter Gomez)

To: +18506176380 <u>Q.5</u> of 6

(Title of person signing)

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