## P24000016416

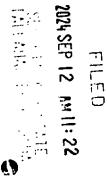
(Re	equestor's Name)	
(Ac	ldress)	· · · · · · · · · · · · · · · · · · ·
(Ac	(dress)	<del></del>
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	

Office Use Only



700436098367

09/12/24--01007--008 \*\*43.75



## COVÉR LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: MTP CAPITAL SOLUTIONS INC DOCUMENT NUMBER: P24000016416 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: VALERIE FASCIGLIONE Name of Contact Person APEX PINNACLE GROUP LLC Firm/ Company 2101 VISTA PARKWAY STE 124 Àddress WEST PALM BEACH, FL 33411 City/ State and Zip Code VALERIE@APEX-PINNACLE.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: VALERIE FASCIGLIONE Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

MTD CADITAL	COLUTIONS INC.	

MTP CAPITAL SOLUTIONS INC	
(Name of Corporati	ion as currently filed with the Florida Dept. of State)
P24000016416	
(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) to
A. If amending name, enter the new name of the co	orporation:
PHX Capital Solutions Corp	Ī
	orporation," "company," or "incorporated" or the abbreviation "Corp" " or "Co". A professional corporation name must contain the word eviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADI	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>
D. If amending the registered agent and/or register new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) & Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<u>gistered Agent:</u> I am familiar with and accept the obligations of the position.
Signa	ature of New Registered Agent, if changing
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 6	

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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	P	JOSHUA D STANLEY	408 SUMMIT RIDGE BLVD
Add			UNIT 182
Remove		!	LONGWOOD, FL 32779
2) X Change	VP	GRIFFIN W HAMMELL	30988 CLUB HOUSE LN
Add			FARMINGTON HILLS, MI 48334
Remove 3) Change	VP	AMIR ABOUR RASHID	411 RIDGE VIEW DR
X Add			DAVENPORT, FL 33837
Remove			
4) Change	CEO	JUAN ANGEL HERRERA	801 S FINANCIAL PL
X Add			UNIT 816
Remove			CHICAGO, IL 60605
5) Change		_	<u> </u>
Add			
Remove		1	
6) Change			
Add		 i	
Remove			

amending or adding additional Articles, enter chait ttach additional sheets, if necessary). (Be specific)	
	<u> </u>
<del></del>	
<del></del>	
	<u> </u>
f an amendment provides for an exchange, reclassifi	cation, or cancellation of issued shares,
provisions for implementing the amendment if not c (if not applicable, indicate N/A)	ontained in the amendment itself:
1 . 1 \(\cap\)	
<u> Ultt</u>	
_	
	1
	1
	1
	<u> </u>
	<u> </u>
	į.

The date of each amendment(s date this document was signed.	i) adoption:	, if other than th
Effective date <u>if applicable</u> : _		
	(no more than	90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	is block does not meet the app Department of State's records	l plicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	adopted by the incorporators, o	or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer		The number of votes cast for the amendment(s)
		through voting groups. The following statement to vote separately on the amendment(s):
"The number of votes of	ast for the amendment(s) was/v	were sufficient for approval
by	(voting group)	<u>                                     </u>
07/15/2 Dated	024	
	Lenn Osta	lie
Signature	<del></del>	<del></del>
(By sele		fficer – If directors or officers have not been the hands of a receiver, trustee, or other court ry)
(By sele	cted, by an incorporator - if in	the hands of a receiver, trustee, or other court
(By sele	cted, by an incorporator – if in ointed fiduciary by that fiduciar Joshua D Stanley	the hands of a receiver, trustee, or other court
(By sele	cted, by an incorporator – if in ointed fiduciary by that fiduciar Joshua D Stanley	the hands of a receiver, trustee, or other court ry)