P240000455915

,	-	(Requestor's Name)
		/Add.coc
	l	(Address)
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		(City/State/Zip/Phone #)
	PICK-UF	MAIT MAIL
		(Business Entity Name)
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<u> —</u>	cial Instructions	s to Filing Officer
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Mia and C Service:	s Corp	
	BER: P24000045598		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	Carmen R Fundora Almeida		
		Name of Contact Persor	1
		Firm/ Company	- 100 to
	18350 NW 68TH AVE Apt F	:	
		Address	
	Hialeah FL 33015		
		City/ State and Zip Code	2
	fundora1965@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Carmen R Fundora A	Almeida	at (<u>786</u>	_)
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

		2024 00-	
(Name of Corporation	on as currently filed with t	he Florida Best. of State)	
		** I*	12
(Docum	nent Number of Corporation	₹!! 	
(1700-tin)	ient reamiter or corporation		
ursuant to the provisions of section 607,1006, Florida s Articles of Incorporation:	Statutes, this <i>Florida Profi</i>	t Corporation adopts the To	ollowing amendment(s
A. If amending name, enter the new name of the co	orporation:		
			The new
name must be distinguishable and contain the word "co 'Inc.," or Co.," or the designation "Corp," "Inc,' 'chartered," "professional association," or the abbre	or "Co". A professiona		reviation Corp.,
3. Enter new principal office address, if applicable	•		
Principal office address MUST BE A STREET ADD			
•	<i>.</i>		
			70
. Enter new mailing address, if applicable:		A.C.	124
(Mailing address MAY BE A POST OFFICE BO	<u></u>	<u> </u>	8 -
		<u>م</u> رائي د ع	The same of the sa
			⇒ : :
		100	
. If amending the registered agent and/or register	red office address in Florid	a, enter the name of the	
new registered agent and/or the new registered		5.	-3
M 6M 6 1 4			_
Name of New Registered Agent		· · · · · · · · · · · · · · · · · · ·	
	(Florida street address)		
New Registered Office Address:	(City)	Florida	(Zip Code)
	icis)		mp cone
lew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.		ne eles abliqueismo se el a cons	piti
nercoy accept the appointment as registered agent.	i am jamiaar wun ana acce	рі іне овиданоня ој те рог	чион.
Signa	iture of New Registered Age	nt, 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)

Example:

Please note the officer/director title by the first letter of the office title:

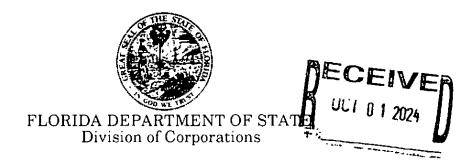
P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director 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>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	<u>P</u>	Carmen R Fundora Almeida	18350 NW 68th Ave Abt Hialeah, FL 33015
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

r., <u>i</u> C	famending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)
(,	. (he specyc)
	· · · · · · · · · · · · · · · · · · ·
F. <u>I</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
	provisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	• • •	
	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this b' document's effective date on the De	lock does not meet the applicable statutory filing requireme partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the a fficient for approval.	mendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendm	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
Signature (By a di	rector, president or other officer – if directors or officers have the base of a receiver, trustee, or officers have a nincorporator – if in the hands of a receiver, trustee, or officers have the base of a receiver.	
	ed fiduciary by that fiduciary)	
	Carmen R Fondora Ali	mei da
	P	
	(Title of person signing)	



September 16, 2024

CARMEN R FUNDOA ALMEIDA 18350 NW 68TH AVE HIALEAH, FL 33015

SUBJECT: MIA AND C SERVICES CORP

Ref. Number: P24000045598

We have received your document for MIA AND C SERVICES CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 824A00020669

Anissa Butler Regulatory Specialist II

www.sunbiz.org