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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: M & J PROFESS.	ONALS, INC	
	MBER: P24000050314		
The enclosed Article	es of Amendment and fee are st	abmitted for filing.	
Please return all cor	respondence concerning this ma	atter to the following:	
	WALTER J MCELHANEY	, JR	
		Name of Contact Perso	<u> </u>
	M & J PROFESSIONALS, I		•
		Firm/ Company	
	1531 NORTH 63RD TERRA	• •	
		Address	
	NORTH LAUDERDALE, F	L 33068	
		City/ State and Zip Cod	le
	waltermcelhaney7@gmail.co	om	
	E-mail address: (to be u	sed for future annual report	notification)
For further information	ion concerning this matter, plea		638-1930
Name	e of Contact Person	at (<u>954</u>)de & Daytime Telephone Number
	for the following amount made		•
S35 Filing Fee	S43.75 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)
An Di [,] P.C	ailing Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Amend Division The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 essee, FL 32303

Articles of Amendment to Articles of Incorporation of

M & J PROFESSIONALS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) P2400050314 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendme is Articles of Incorporation: If amending name, enter the new name of the corporation: The new ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: WALTER J. MCELHANEY, JR	— ·— - — - — - — - — - — - — - — - — - —		
(Document Number of Corporation (if known) arsuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendme staticles of incorporation: If amending name, enter the new name of the corporation: The new time must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word that the word "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	(<u>Name</u>	of Corporation as currently filed with the Fl	orida Dept. of State)
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West registered agent and/or the new registered office address:	Enter new mailing address, if appl (Mailing address MAY BE A POST	icable: OFFICE BOX)	
WALEST A CONTRACTOR	If amending the registered agent an	id/or registered office address in Florida, ent	er the name of the
			·
(Florida street address)		(Florida street address)	
New Registered Office Address:	New Registered Office Address:	(City)	
	ew Registered Agent's Signature, if cl hereby accept the appointment as registi	nanging Registered Agent: ered agent. I am familiar with and accept the c	phlications of the position
ever Registered Agent's Signature, if changing Registered Agent: ereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	Š	5 James and decept the C	renganons of the position,
ew Registered Agent's Signature, if changing Registered Agent: sereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	<u> </u>		
ew Registered Agent's Signature, if changing Registered Agent: nereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		Signature of New Registered Agent, if ch	hansing

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.

Example:

X Change	<u>PT</u>	John Doe	
\underline{X} Remove	<u>V</u>	Mike Jones	
$X ext{Add}$	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	PRES	WALTER J MCELHANEY JR	
Add			
Remove 2) X Change	VP	DARRON L JOHNSON	
2) Change Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
5)Change	-	_	
Add			
Remove			
6) Change			
Add			
Remove			

	eets, if necessary).				
MENDING TO CORF	RECT THE SPELLIN	SG OF THE OFFICE	CERS NAMES.		
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If an amendment pro	ovides for an excha-	nge, reclassificatio	n, or cancellation	of issued shares.	
provisions for imple	ementing the amend	lment if not conta	ined in the amend	ment itself:	
(if not applicable	e, matcate N/A)				
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			<u> </u>		

date this document was signed.	·	, if other than
Effective date if applicable:		
	(no more than 90 a	lays after amendment file date)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicab partment of State's records.	ole statutory filing requirements, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or boa	ard of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The nufficient for approval.	umber of votes cast for the amendment(s)
"The number of votes east i	or the amendment(s) was/were s	
	(voting group)	<u> </u>
8/28/2024 Dated Signature	Mr Eller	
sciected	ector, president or other officer- by an incorporator – if in the had d fiduciary by that fiduciary)	- if directors or officers have not been ands of a receiver, trustee, or other court
,	VALTER J MCELHANEY, JR	
~	(Typed or printed nam	ne of person signing)
ŀ	RESIDENT	