P24000070361

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

1

NAME OF CORPO	RATION: MHKD INVESTM	IENTS FLORIDA, INC			
	BER: P24000070361				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	CARLOS M. HERRERA-CA	ALLE			
		Name of Contact Person	n		
	MHKD INVESTMENTS FL	ORIDA, INC			
	-	Firm/ Company			
	16158 SEA GLASS WAY				
		Address			
	WESTLAKE FL 33470				
		City/ State and Zip Cod	e		
	elmaosis@gmail.com				
	-	sed for future annual report	notification)		
For further informatio	n concerning this matter, please.		602-8063		
Name (of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ling Address endment Section	Street Address Amendment Section			
Divi	sion of Corporations	Division of Corporations			
	Box 6327 ahassee, FL 32314		entre of Tallahassee		
1 411	000000CC L DED 19	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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(Name of Corporation as curre	ntly filed with the Florida D	Dept. of State)	
P24000070361			
(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation	n adopts the following	g amendment(s) t
A. If amending name, enter the new name of the corporation:			
	2.42		The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.	A professional corporation	ed or the abbreviatio n name must contain	n "Corp., the word
B. Enter new principal office address, if applicable:		-1 2	<u>ာ</u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			2
			· ·
	·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		-,-	
			
		,	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr		name of the	
Name of New Registered Agent			
(Florida	street address)	-	
New Registered Office Address:		Florida	
	(City)	(Zip C	ode)
New Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent. I am familia		ione of the position	
and the second supposition and the second se	a wan and accept the orniga	ions of the position.	
Signature of Nev	Registered Agent, if changin		
Check if applicable			
zneek ii applicabie			

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>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	KATHERINE DUARTE	16158 SEA GLAS WAY
Add			WESTLAKE FL 33470
X Remove			
2) Change	<u>T</u>	KATHERINE DUARTE	16158 SEA GLASS WAY
X Add			WESTLAKE FL 33470
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			·
6) Change			
Add			
Remove			

nge(s) here:
<u> </u>
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<u> </u>
· <u></u>

ication, or cancellation of issued shares,
contained in the amendment itself:
The second secon

.

The date of each amendment(s)	11/25/2024 doption: , if other than th
date this document was signed.	
Effective date <u>if applicable</u> :	25/2024
interive date in applicable.	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were act by the shareholders was/were	opted by the shareholders. The number of votes east for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	for the amendment(s) was/were sufficient for approval
by	
	(voting group)
11/26/202 Dated	
Signature	Carlo N Aevrera
select	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	CARLOS M. HERRERA-CALLE
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)