## P950000 83906

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## **COVER LETTER**

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TO: Amendment Sec Division of Corp				19 OCC - 3 PAID: SH
NAME OF CORPO	Advanced Magnet	Lab, Inc.		3
DOCUMENT NUM	P95000083906 BER:			L. S. S.
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Mark Senti			
	Advanced Magnet Lab, Inc.	Name of Contact Person	1	
	1604 S Harbor City Blvd	Firm/ Company		
	Melbourne, FL 32901	Address		
		City/ State and Zip Code		
info	@amlsm.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Wade Senti		321 at (	501-6660	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	iling Address tendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee 8. Monroe Street, Suite 810 ssee, FL 32303	

## Articles of Amendment to Articles of Incorporation

Articles of Incorporation of Advanced Magnet Lab, Inc.

Advanced Magnet 13.0; the	
(Name of Corporation as currently filed with t	
P95000083906	2
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profi</i> its Articles of Incorporation:	it Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professiona "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
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 address in Florid new registered agent and/or the new registered office address:	da, enter the name of the
Name of New Registered Agent	
The state of the s	
(Florida street address)	
New Registered Office Address:	. Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar with and acce	ppt the obligations of the position.
Signature of New Registered Age	ent, if changing

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	ve, ana san <u>PT</u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	0	Rainer B. Meinke	1604 S Harbor City Blvd
Add	<del></del>		Melbourne, FL 32901
X Remove			
2) Change			1 <u></u>
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
E. If amending or add	ding additio	onal Articles, enter change(s) here:	

(Attach additional sheets, if necessary). (Be specific)

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provisions for implementing the amen (if not applicable, indicate N/A)	idment if not	contained in the	amendment	<u>itself:</u>	
		·			<del></del>
<del></del>	· ·				
	· · ·				
				<del> </del>	
		Page 3 of 4			
	11/22/2019				
The date of each amendment(s) adoption: date this document was signed.				<u>-</u>	, if other than th
Effective date <u>if applicable</u> :					
many trace is approxime.	(no more	than 90 days aft	er amendment	file date)	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adopty the shareholders was/were sufficiently.	oted by the shareholders. The number of votes cast for the amendment ficient for approval.	(s)
	roved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes east t	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareholder	
selected	rector, president or other officer / if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other course fiduciary by that fiduciary)	
	Mark Senti	
-	(Typed or printed name of person signing)	
	President	
<del>-</del>	Title of person signing)	<del></del>