## 563325

| (Requestor's Name)                      |  |  |  |  |  |
|---|--|--|--|--|--|
| (Address)                               |  |  |  |  |  |
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| (City/State/Zip/Phone #)                |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
| (Business Entry Name)                   |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |  |
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Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CO                        | RPORATION: Miami General F   | Employee Association Holdi                                       | ing Corp.   |  |  |
|-----------------------------------|--|--|---|--|--|
| DOCUMENT N                        | NUMBER: S63325   |  |   |  |  |
| The enclosed Ar                   | rticles of Amendment and fee are su  | ubmitted for filing.   |   |  |  |
| Please return all                 | correspondence concerning this ma  | atter to the following:  |   |  |  |
|                                   | Sean Moy   |  |   |  |  |
|                                   |  | Name of Contact Person   | 1   |  |  |
|                                   | Miami General Employee Association Holding Corp.   |  |   |  |  |
|                                   |  | Firm/ Company  |   |  |  |
|                                   | 4011 W. Flagler Street #405  |  |   |  |  |
|                                   |  | Address  |   |  |  |
|                                   | Miami, Florida 33134   |  |   |  |  |
|                                   |  | City/ State and Zip Cod  | e   |  |  |
|                                   | local1907union@gmail.com   | ı  |   |  |  |
|                                   |  | sed for future annual report                                     | notification)   |  |  |
| For further infor<br>Debbie Brown | mation concerning this matter, plea  | ase call:<br>at (at (  | 643-2254  |  |  |
|                                   | Name of Contact Person   | at (<br>Area Co  | de & Daytime Telephone Number   |  |  |
| Enclosed is a ch                  | eck for the following amount made  |  |   |  |  |
| ■ \$35 Filing F                   | Fee □\$43.75 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)                    |  |  |
|                                   | Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Ameno<br>Divisio<br>The C<br>2415 i                              | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 |  |  |

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept2#State) 31 PH 4:29 N/A N/A (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendiatent(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. 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: Name of New Registered Agent (Florida street address) New Registered Office Address: (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 accept the obligations of the position, Signature of New Registered Agent, 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)

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       |                             |
| <u>X</u> Add               | <u>sv</u>    | Sally Smith      |                             |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u>      | <u>Addres</u> s             |
| 1) Change                  | O            | Anthony Thurston | 4011 W. Flagler Street #405 |
| X Add                      |              |                  | Miami, FL 33134             |
| Remove                     |              |                  |                             |
| 2) Change                  | T            | Debbie Brown     | 4011 W. Flagler Street #405 |
| Add                        |              |                  | Miami, FL 33134             |
| X Remove 3) Change         |              |                  |                             |
| Add                        |              |                  |                             |
| Remove                     |              |                  |                             |
| 4) Change                  |              |                  |                             |
| Add                        |              |                  |                             |
| Remove                     |              |                  |                             |
| 51 Change                  |              |                  |                             |
| Add                        |              |                  |                             |
| Remove                     |              |                  |                             |
| 6) Change                  | ·            |                  |                             |
| Add                        |              |                  |                             |
| Remove                     |              |                  |                             |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) |             |
|---|-------------|
| N/A   |             |
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| F. If 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)       |             |
| (y not applicable, inalcale MA) N/A   |             |
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|   | N/A   |                                |
|---|---|--------------------------------|
| The date of each amendment(s)                                       | adoption:   | , if other than the            |
| date this document was signed.                                      |   |                                |
| Effective date <u>if applicable</u> :                               | N/A   |                                |
| Titetive date ir applicable.  | (no more than 90 days after amendment file date)  | - <del></del>                  |
| Note: If the date inserted in this locument's effective date on the | block does not meet the applicable statutory filing requirements, this Department of State's records.   | date will not be listed as the |
| Adoption of Amendment(s)  | (CHECK ONE)   |                                |
| The amendment(s) was/were a action was not required.                | dopted by the incorporators, or board of directors without shareholder a  | ction and shareholder          |
| The amendment(s) was/were a by the shareholders was/were            | dopted by the shareholders. The number of votes cast for the amendme sufficient for approval.   | nt(s)                          |
|   | pproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):  | ment                           |
| "The number of votes ca   | st for the amendment(s) was/were sufficient for approval  |                                |
| by N/A  | <i>,</i> •  |                                |
| • = = = = = = = = = = = = = = = = = = =                             | (voting group)  |                                |
| January   | 23, 2024  |                                |
| Signature(By/z) selec   | difector, president or other officer - if directors or officers have not beeted, by an incorporator - if in the hands of a receiver, trustee, or other cointed fiduciary by that fiduciary) |                                |
|   | Sean Moy For  |                                |
|   | (Typed or printed name of person signing)   |                                |
|   | President   |                                |
|   | (Title of person signing)   |                                |