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C. GOLDEN
DEC -7 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: May lin	Cartractus, Inc.
NAME OF CORPORATION: May lind	8
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
mori	Name of Contact Person
Liman	Enterprises UC Firm Company
80.02	SW 21st Place
Davi	City/ State and Zip Code
E-mail address: (to be a	tern @ att.net used for future annual report notification)
For further information concerning this matter, plea	ase call:
Sylvia Limen	at (305) E79 - 617-7 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
☐ \$35 Filing Fee ☐\$43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

	stractors , I		2815 MOV - 8 PM 12: 4	Ī.I
	orporation as currently		Dept. of State)	<i>)</i> 4
V 690	(Document Number of C			
	(Document Number of C	Corporation (if known)	.,	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6, Florida Statutes, this Fi	lorida Profit Corporatio	n adopts the following amendment(i) to
A. If amending name, enter the new name	of the corporation:			
name must be distinguishable and contain			The new	
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association B. Enter new principal office address, if a (Principal office address MUST BE A STR)	n "Corp," "Inc," or "Co ," or the abbreviation "P. oplicable:	o". A professional cor	orporated" or the abbreviation poration name must contain the	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OF)		N(N		
D. If amending the registered agent and/o new registered agent and/or the new re		ss in Florida, enter the	name of the	
Name of New Registered Agent	NA			
	(Florida stree	t address)		
New Registered Office Address:	·		, Florida	
	(0	Σity)	(Zip Code)	
New Registered Agent's Signature, if chan I hereby accept the appointment as registered		th and accept the obliga	tions of the position.	
	Signature of New Rev	gistered Agent, if changi	ing	

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.

	ie, ana sa	uy omin, 55 to the side.	
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	<u>Title</u>	<u>Name</u>	Address
(Check One) 1) Change	<u>.S</u>	Sylvia Limon	8002 SW 21st place Davie FL 33324
Add			Davie FL 33321
_X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>ada</i>	ng or adding additional Articles, er litional sheets, if necessary).— (Be s _i	<u>ter change(s) here</u> ; pecific)		
	A			
15-				

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	<u> </u>			
				<u>-</u>
•				
<u>provision</u>	ndment provides for an exchange, r is for implementing the amendment t applicable, indicate N/A)	eclassification, or car if not contained in the	ncellation of issued sha he amendment itself:	ires.
<u> </u>			<u> </u>	
		1172,71171		
				

The date of each amendment(s) adoption:	
l. 122 10	
Effective date if applicable: [D 22 19] (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust be separately provided for each voting group entitled to vote separately on the amendment(s).	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	holder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	er
Dated10 22 15	
Signature (By adjrector, president or other officer – if directors or officers have not be	
selected, by an incorporator – if in the hands of a receiver, trustee, or other	court
appointed fiduciary by that fiduciary)	
Typed or printed name of person signing)	<u>.</u>
(Typed or printed name of person signing)	
(Typed of printed name of person signing) Sleve av (Title of person signing)	
(Title of person signing)	