P110000051242

| (Re | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ac | ddress) | |
| . (Ac | ddress) | |
| (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | usiness Entity Na | me) |
| (Do | ocument Number) | |
| Certified Copies | Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
| · | | |
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| | | |

Office Use Only



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DIVISION OF CORPORATIONS

Amund 10/8/11

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

| Division of | Corporations | | |
|--|---|--|---|
| NAME OF CO | RPORATION:CAI | MAX CORP | · |
| DOCUMENT N | iumber: <u>P11000</u> | 051262 | |
| The enclosed Arr | ticles of Amendment and fee a | re submitted for filing. | |
| Please return all | correspondence concerning thi | s matter to the following: | |
| | | SAUDOVZ ame of Contact Person | - 1 to |
| | ., | and or contact t vices. | |
| | | Firm/ Company | |
| | 6030 NW 9 | 59 AVE \$401 | |
| | | Address | |
| | Miami, F | L 33178 | |
| | Ci | ty/ State and Zip Code | |
| - Apply part | SAII) SAUDUM F E-mail address: (to be used | TOT MAIL, COM I for future annual report notification) | |
| For further inform | mation concerning this matter, | please call: | |
| SAID | SAUDOR | at (554) 889 - | 7071 |
| Nan | ne of Contact Person | Area Code & Daytime Tel | |
| Enclosed is a che | ck for the following amount m | ade payable to the Florida Depart | ment 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) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 | | Street Address Amendment Section Division of Corporations Clifton Building | |

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| · | of | or por accom | 500000 |
|---|----------|--|----------------------|
| CAIMAY CORP | | | 6 |
| (Name of Corporation as currently filed | d with (| the Florida Dept. of State) | Pr. " |
| P110000 51262 | | | 8 |
| (Document Number of Co | orporati | ion (if known) | |
| Pursuant to the provisions of section 607.1006, Florida mendment(s) to its Articles of Incorporation: | a Statut | tes, this <i>Florida Profit Corporatio</i> | on adopts the follow |
| A. If amending name, enter the new name of the corp | oratio: | n: | |
| | | | The new |
| name must be distinguishable and contain the word abbreviation "Corp.," "Inc.," or Co.," or the designate name must contain the word "chartered," "professional | ion "Ce | orp," "Inc," or "Co". A profess | ional corporation |
| 3. Enter new principal office address, if applicable: | | 6030 NW 99 AUE # | 401 |
| Principal office address <u>MUST BE A STREET ADDI</u> | ESS) | 6030 NW 99 ALE # MIRMI, FL 33178 | |
| • | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 1 | | |
| | | | |
| | | | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered off | | | ne of the |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | ida street address) | |
| | | , Florida | |
| | (City) | (Zip Code) | |
| ew Registered Agent's Signature, if changing Registe | | | |
| hereby accept the appointment as registered agent. I a | m famil | liar with and accept the obligation | s of the position. |
| - CV | -CW- | D-2-4 | |
| signature o | oj wew. | Registered Agent, 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)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|---|--|-----------------------|
| P | CAITO FIGUEIREDO | 6030 NW 93 AU #401 MIAMI, FL 33178 | À Add □ Remove |
| VP | MAXWELL CRUZ | 6030 NW 90 ALS \$40. Majami, FL 33178 | Add Remove |
| 5 | SAID SAUDER | 6030 NW 99 AUSHYO MIAMI, FL. 33178 | Add ☐ Remove |
| | nding or adding additional Articles, entended additional sheets, if necessary). (Be spec | | |
| | | | |
| | | | |
| | | | |
| provis | mendment provides for an exchange, relons for implementing the amendment is not applicable, indicate N/A) | classification, or cancellation of iss f not contained in the amendment i | ued shares, tself: |
| | | | |
| | | | |
| | | | |
| | • | , | |

| The date of each amendment(s) adoption: |
|--|
| (date of adoption is required) |
| Effective date if applicable: (no more than 90 days after amendment file date) |
| (no more than 90 days after amendment file date) |
| |
| Adoption of Amendment(s) (CHECK ONE) |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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" |
| by" (voting group) |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. |
| Dated 8/3//2011 |
| a Suine |
| Signature(By a director, president or other officer – if directors or officers have not been |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court |
| appointed fiduciary by that fiduciary) |
| Caso Femined of Matter Donnes (Typed or printed name of person signing) |
| (De peurso |
| (Title of person signing) |
| |
| D.# 21465465 |
| Notary Public State of Florida |
| Circe Sosa My Commission DD833865 |