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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: MARO BUILDER	S CORP		
DOCUMENT NUM				
-	s of Amendment and fee are su	bmitted for filing.		
¹⁴ lease return all corr	espondence concerning this ma	tter to the following:		
	Matthew Rothstein			
		Name of Contact Persor	1	
	Maro Builders Corp			
		Firm/ Company		
	3501 keyser ave apt 19			
		Address		
	Hollywood, FL 33021			
		City/ State and Zip Cod	e	
resta	ilstl@gmail.com			
	- -	sed for future annual report	notification)	
	·		•	
For further informati	on concerning this matter, pleas	se call:		
matthew rothstein		954 at (980-4856 de & Daytime Telephone Number	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
国 \$35 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			Address	
	nendment Section vision of Corporations	Amendment Section Division of Corporations		
	O. Box 6327	Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MARO BUILDERS CORP.	. 			
· · · · · · · · · · · · · · · · · · ·	f Corporation as currently	filed with the Florida D	ept. of State)	
142354				
	(Document Number of C	Corporation (if known)		
dursuant to the provisions of section 607, s Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporatio	n adopts the following	g amendment(s)
. If amending name, enter the new na	me of the corporation:			
				_The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associal	ation "Corp," "Inc." or "C	o". A professional corp		
3. Enter new principal office address, i Principal office address <u>MUST BE A S</u>				
Enter now mailing addrage if appli	sabla			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				·
				~;
				<u></u>
. If amending the registered agent an		ss in Florida, enter the	name of the	2:53
new registered agent and/or the nev	•			
Name of New Registered Agent	Matthew Rothstein			_
	3501 Keyser Ave Apt 19			
	tFlorida strec	t address)		-
New Registered Office Address:	Hollywood		, Florida	
		Ciņa	(Zip)	('ode)

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

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 Doc	
X Remove	<u>v</u>	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	VPT	Matthew Rothstein	3501 keyser ave apt 19
$\frac{X}{X}$ Add			Hollywood, FL 33021
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change		_	<u> </u>
Add			**
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary)	(Be specific)
. /	
	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:	
(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, this date will a document's effective date on the Department of State's records.	not be listed as the
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"	
(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 July 8, 209	
Signature 100 Hothers	_
(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)	
IRA ROTHSTEIN	
(Typed or printed name of person signing)	
DPS	
(Title of person signing)	