## H48775

(Re	questor's Name)		
(Ad	dress)	,	
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
		:	

Office Use Only



500273040835

500273040835 06/09/15--01026--003 \*\*35.00





## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPO	RATION: BIMAX INC.		
DOCUMENT NUMI			
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	DEBORAH DIAZ		
		Name of Contact Person	1
	RAMPELL & RAMPELL		
	223 SUNSET AVE SUITE	Firm/ Company	
		Address	
	PALM BEACH, FLORIDA	33480	
		City/ State and Zip Code	e
ddiaz	@rampell.com		
<u></u>		sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Deborah Diaz		at (	655 - 5855
Name	of Contact Person	Area Code & 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)
Ame Divi P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

BIMAX INC.	
(Name of Corporation as	s currently filed with the Florida Dept. of State)
H48775	
(Document 1	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corpor	ration:
N/A	The new
	corporation," "company," or "incorporated" or the abbreviation lnc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRES	<u></u>
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered o	ffice address in Florida, enter the name of the
new registered agent and/or the new registered offic	e address:
N/A Name of New Registered Agent	
	(Florida street address)
No. Berlin LOW. Alle	D1. 11
New Registered Office Address:	, Florida(City) (Zip Code)
	VZ.
New Registered Agent's Signature, if changing Register	ed Agent:
I hereby accept the appointment as registered agent. I am	familiar with and accept the obligations of the position.
	第二章 · · · · · · · · · · · · · · · · · · ·
	9 -
Signature	e 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: XChange	<u>PT</u>	John Doe	
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	DPT	WILLIAM R WEST	223 SUNSET AVE SUITE 200
Add			PALM BEACH FLORIDA
X Remove			33480
2) Change	S	ROBERT W WEST	223 SUNSET AVE SUITE 200
Add	-		PALM BEACH FLORIDA
X Remove			33480
3) Change	DPT	LYNN A WEST	223 SUNSET AVE SUITE 200
X Add	<del>- " . ' .</del>		PALM BEACH FLORIDA
Remove			33480
4) Change			
Add			
Remove			<del></del>
5) 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
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)
N/A

The date of each amendment(s	adoption:	, if other than the
date this document was signed.	,	
j	UNE3,2015	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amen sufficient for approval.	dment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sha	areholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	older
JUNE3,	2015	
Dated		
Signature	dym What	
	a director, president or other officer - if directors or officers have no	ot been
sele	cted, by an incorporator - if in the hands of a receiver, trustee, or other	her court
app	pinted fiduciary by that fiduciary)	
•	LYNN WEST	
	(Typed or printed name of person signing)	<del> </del>
	PRESIDENT	
	(Title of person signing)	