N0500005162

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	MA DN :	XWELL GROUP	HOME, INC.	
DOCUMENT NUMBER:		N0500000		
The enclosed Articles of Am	endment and fee are submi	tted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
	MAT	THEW CUNNING	GHAM	
	(1	Name of Contact Pe	erson)	
	EXCEL TA	X & ACCOUNTIN	G SERVICES	
		(Firm/ Company	7)	· <u></u>
	200	040 NW 29TH COU	JRT	
		(Address)		
	MIA	MI GARDENS, FL	.33056	
	((City/ State and Zip (Code)	
	588	89@COMCAST.NI	ET	•
E	mail address: (to be used f	or future annual rep	ort notification)
For further information conce	erning this matter, please ca	all:		
MAT	THEW CUNNINGHAM	at	305	623-0654
	(Name of Contact Person)	ut	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made paya	able to the Florida I	Department of S	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi S Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

Mailing Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



MAXWELL GROUP HOME, INC.			- 15 PM 1:38
(Name of Corporation as cu	rrently filed with the Flor	ida Dept. of Si	late) TALE
N05000005162			SECRETALLY OF STATE SECRETALLY OF STATE SECRETALLY OF STATE SECRETALLY OF STATE
(Document N	lumber of Corporation (if k	nown)	TALLAH
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not Fo	r Profit Corpoi	ration adopts the following
A. If amending name, enter the new name of the corp	oration:		
			The new
name must be distinguishable and contain the word "corp" ("Company" or "Co." may not be used in the name.	poration" or "incorporated	t" or the abbre	viation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR)	ESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amounting the presistance against and/ou registered	office address in Florida	outou the new	o of the
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		enter the nam	<u>e or the</u>
Name of New Registered Agent:			
	(F	lorida street addres	is)
New Registered Office Address:			
		,	Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Registed hereby accept the appointment as registered agent. I a		the obligations	of the position.
<u> </u>			
	Signature of New Regis	ered Agent, if c	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 X Remove X Add	PT John D Y Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>v</u>	JOYCELYN BAKER	19320 NW 7TH AVENUE
Add			MIAMI GARDENS
X Remove			FL. 33169
2) Change	D	DORRETT CLARK	8520 LONG ACRE DRIVE
Add			MIRAMAR
X Remove			FL. 33025
3) Change	D	BEVERLY BREVETT	6141 SW 30TH STREET, APT. 6
Add			MIRAMAR
X Remove			FL. 33025
4) Change			
Add			
Add			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
Keinove			

amending or adding additional Arti ach additional sheets, if necessary).	(Be specific)
, ·	
·	
,	
.	

he date of each amendment(s) ado	ption:	, if other than the
ate this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block ocument's effective date on the Department.	does not meet the applicable statutory filing requirements, this date will a triment of State's records.	not be listed as the
adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	
There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated	MARCH 8, 2016	
have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	YVONNE POWELL-MAXWELL	
	(Typed or printed name of person signing)	
	PRESIDENT	•
·-·	(Title of person signing)	