N18000006527

200315858112

(Requestor's Name)

(Address)
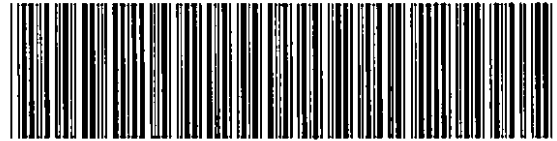
(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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T. LAMBERT

COVER LETTER

TO: Amendment Section
    Division of Corporations

NAME OF CORPORATION: MAX FREEDOM INC.
_____

DOCUMENT NUMBER: N18000005027
_____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID HERNANDEZ
_____
(Name of Contact Person)

DHCPA, INC
_____
(Firm/ Company)

8725 NW 18TH TERRACE, SUITE 302
_____
(Address)

MIAMI/FL 33172
_____
(City/ State and Zip Code)

DHERNANDEZ@DHCPAINC.COM
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ADRIANA HEREDIA LOPEZ   at   786   281 9654
_____
(Name of Contact Person)   (Area Code)   (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

■ $35 Filing Fee   ☐$43.75 Filing Fee &   ☐$43.75 Filing Fee &   ☐$52.50 Filing Fee
                Certificate of Status   Certified Copy   Certificate of Status
                               (Additional copy is   Certified Copy
                               enclosed)   (Additional Copy is
                                                Enclosed)

Mailing Address   **Street Address**
Amendment Section   Amendment Section
Division of Corporations   Division of Corporations
P.O. Box 6327   Clifton Building
Tallahassee, FL 32314   2661 Executive Center Circle
                                       Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

MAX FREEDOM INC
_____
(Name of Corporation as currently filed with the Florida Dept. of State)

N18000005027
_____
(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____*The new*
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable: _____
(Principal office address MUST BE A STREET ADDRESS)

_____

_____

C.   Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)   _____

_____

_____

D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:

Name of New Registered Agent: _____

_____
                                                        (Florida street address)
New Registered Office Address:

_____. Florida _____
                         (City)   *(Zip Code)*

New Registered Agent's Signature, if changing Registered Agent:
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

Page 1 of 4

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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address

1) ____ Change   _____   _____   _____

____ Add   _____

____ Remove   _____

2) ____ Change   _____   _____   _____

____ Add   _____

____ Remove   _____

3) ____ Change   _____   _____   _____

____ Add   _____

____ Remove   _____

4) ____ Change   _____   _____   _____

____ Add   _____

____ Remove   _____

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)

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of

Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be

distributed to the federal government, or to a state or local government ,for a public purpose. Any such assets not disposed

of by a court of competent jurisdiction in the country in which the principle office of the organization is then located,

exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are

organized and operated exclusively for such purposes.

The date of each amendment(s) adoption: 07/18/18 _____, if other than the
date this document was signed.

Effective date if applicable: 05/03/2018 _____

(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 not be listed as 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 members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 07/18/2018 _____

Signature _____
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

DAVID HERNANDEZ
_____
(Typed or printed name of person signing)

PRESIDENT
_____
(Title of person signing)