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JIVISION OF CONFONATION

DEC 21 2016 C LEWIS

COVER LETTER

Division of Corporations
NAME OF CORPORATION: MAYCH SALES INC.
DOCUMENT NUMBER: TYNYYVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVV
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Joseph Puleo Jr
West Point Industries
1300 Old Dixie Hwy 101
Lake Park FL 33403
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Joseph Pules Jr # 561, 707-9645
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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

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iii SubRe	IARY OF STATE	
PLAISION	OF CORPORATE	

	March	01		2016 DEC 19	## 1.22
	March	Sales	Inci		111 1.22
	(Name of Corp.	Dos S. S. S. S. C.	filed with the Florida D	ept. of State)	
		TOODOOD	(2)2/		
	(D	ocument Number of C	Corporation (if known)		
Pursuant to the provisions of its Articles of Incorporation:	section 607.1006, F	lorida Statutes, this FI	lorida Profit Corporation	adopts the following a	nendment(s) to
A. If amending name, enter	the new name of t	he corporation:			
			11 // 11 // // // 12 // // // // // // // // // // // // //		ie new
name must be distinguishab "Corp.," "Inc.," or Co.," o word "chartered," "profession	r the designation "	Corp," "Inc," or "Co	o". A professional corp	rporatea or the abbr poration name must con	evianon tain the
B. Enter new principal office (Principal office address MU)					
C. Enter new mailing addi					
(Mailing address <u>MAY B</u>	<u>E A POST OFFICI</u>	E BOX)			
D. If amending the register new registered agent an			ss in Florida, enter the i	name of the	
•		insenh	Pulen -	5~	
Name of New Regist	ered Agent	200CP11	101000	1 101	
		<u> </u>	1 DIXIP T	MM # 101	
	1		i adaress)	7771	17/2
New Registered Office	ce Address:(are Par	Zity)	, Florida	<u>1Ψ</u> Ο
		,,		(2)	-7
New Registered Agent's Sig	mature, if changing	Registered Agent:			
I hereby accept the appointm	ent as registered ago	ent. I am familiar wii	th and accept the obligat	ions of the position.	
		_		/	
			////	/	 -
	······································	Signature of New Reg	zistered Agent, if changir	ng	

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	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	e Robert Greaves	1300 Old Dixle Hwy
Add		Suite 101
Remove		Lake Park, FL 334\$3
2) Change	S Eleanor Dorthy Bernice Greaves	1300 Old Dixie Hwy
Add	Situates	
Remove		Lake Park, FL 33403
3) Change	P Joseph Puleo Jr	1300 Old Dixie Hwy
X Add		Suite 101
Remove		Lake Park, Fl 33403
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

E. If amending or adding additional Articles, (Attach additional sheets, if necessary). (Be	enter change(s) here: specific)
Article VIT Incom	porator:
Remove: Robert	•
13000 0	old Dixie Hwy
Suite	9
lake f	Park, Fl 33403
Add: Joseph	Puleo Jr
1380	old Dixie Hwy
Suite	10/1
	Park, FL 33403
	, reclassification, or cancellation of issued shares, ent if not contained in the amendment itself;
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	
date this document was signed.	DIVISION OF COKE OF ALL
Effective date <u>if applicable</u> :	2016 DEC 19 PH 1: 22
(no more than 90 days after amendment file date)	1:22
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will 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 amend by the shareholders was/were sufficient for approval.	diment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment(s).	statement 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.	reholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	dder
Dated 12/15/16	
Signature	
(By a director, president or other officer - if directors or officers have no	t been
selected, by an incorporator—If in the hands of a receiver, trustee, or oth	
appointed fiduciary by that fiduciary)	
Joseph Puleo Jr	
(Typed or printed name of person signing)	
President	
(Title of person signing)	