1-67000092437

(Re	equestor's Name)	
(Ac	ddress)	
. (Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Ви	usiness Entity Name)	
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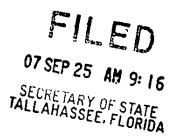
' PHONE NO. : 17182320843

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: MAXIMA AU	ITO INC	
DOCUMENT NU	MBER: P07000092437		
The enclosed Artic	eles of Amendment and fee a	rc submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
AHN	MED Y SALEH		
	(Name o	of Contact Person)	
MA	XIMA AUTO INC		
**************************************	(Fir	m/ Corapany)	
255	S BELCHER RD		
		(Address)	
CLE	ARWATER, FL 33765		
	(City/ St	ate and Zip Code)	
For further informa	ation concerning this matter,	please call:	
AHMED Y SALEH	1	at (917) 292-334	7
(Name	e of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check	k for the following amount:		
S35 Filing Fee	S43.75 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)
Mailing Address Amendment Section		Street Address Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		Clifton Building 2661 Executive Center Cir	-ote
Tallahassee, FL 32314		Tallahassee FL 32301	OIC

MAXIMA AUTO,INC -



Articles of Amendment to Articles of Incorporation of

(Name of corporation as currently filed with the Florida Dept. of State)			
P0700092437			
(Document number of corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of incorporation:			
NEW CORPORATE NAME (if changing);			
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")			
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)			
ADDING OFFICER:			
IHAB A. SALEH VIC. PRESIDENT			
144 DOUGLAS RD W			
OLDSMAR FL 34677			
(Attach additional pages if necessary)			
If an amendment provides for 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)			
(continued)			

. . .

The date of each amendment(s) adoption: 8-16-2007		
Effective	date if <u>applicable</u> :	
•		(no more than 90 days after amendment file date)
Adoption	of Amendment(s)	(CHECK ONE)
Ø	The amendment(s the amendment(s)) was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.
	The amendment(s following statement separately on the) was/were approved by the shareholders through voting groups. The not must be separately provided for each voting group entitled to vote amendment(s):
	"The number of	of votes cast for the amendment(s) was/were sufficient for approval by
		(voting group)
	•) was/were adopted by the board of directors without shareholder action was not required.
	The amendment(s) shareholder action) was/were adopted by the incorporators without shareholder action and was not required.
	Signature	Ahmed Y. Saleh
	(By a	director, president or other officer - if directors or officers have not been cted, by an incorporator - if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Ah	MED Y SALEH
	·	(Typed or printed name of person signing)
	PF	RESIDENT
	<u></u> -	(Title of person signing)

FILING FEE: \$35