P100001535

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	MAXIPAN GROUP COR	<u> </u>	
DOCUMENT NU	NUMBER: P10000015357			
The enclosed Artic	les of Amendment and fee a	re submitted for filing.		
Please return all co	rrespondence concerning thi	is matter to the following:		
		HENRY MEDINA	·	
	. N	lame of Contact Person		
	MED	INA & ASSOCIATES		
•		Firm/ Company		
	7220) NW 36 ST STE 550		
्र इ. १	7	Address		
	• •			
		MIAMI, FL 33166		
	C	ity/ State and Zip Code		
For firsther informs	E-mail address: (to be use	d for future annual report notification)		
	_		96043B	
	ENRY MEDINA of Contact Person	at (305) 92 Area Code & Daytime Tele	69438 phone Number	
		nade payable to the Florida Departr		
■\$35 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 Ac Amendmen		Street Address Amendment Section Division of Corporations		
P.O. Box 6	•	Clifton Building	M = vinger,	
Tallahassee	e, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	;	

Articles of Amendment

to

Articles of Incorporation

MAXIPAN GROUP CORP

(Name of Corporation as currently filed with the Florida Dept, of State)

P10000015357	
(Document Number of Corporati	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the follo
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional associa	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	13980 SW 111 ST
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FL 33186
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13980 SW 111 ST
	MIAMI, FL 33186
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
Name of New Registered Agent: BERTHAL N	MARTINEZ
13980 SW 1	11 ST
New Registered Office Address: (Flori	ida street address)
MIAMI (City)	, Florida_33186 (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	
	MO Y OY TNOZ Registered Agent, if changing
	1

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
P	JUAN C SALAZAR	16287 SW 92 TERRACE MIAMI, FL 33196	☐ Add ☑ Remove
<u>P</u>	BERTHA L MARTINEZ	13980 SW 111 ST MIAMI, FL 33186	
	ding or adding additional Articles, en additional sheets, if necessary). (Be sp		
provis	mendment provides for an exchange, ions for implementing the amendmen not applicable, indicate N/A)		
			·

The date of each amendme	ent(s) adoption: MAY 17TH, 2010 (date of adoption is required)
Effective date <u>if applicable</u>	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	were adopted by the shareholders. The number of votes cast for the amendment(s were sufficient for approval.
	were approved by the shareholders through voting groups. The following statemed ded for each voting group entitled to vote separately on the amendment(s):
"The number of vote	es cast for the amendment(s) was/were sufficient for approval
by	,"
	""
action was not required. The amendment(s) was/v	were adopted by the board of directors without shareholder action and shareholder
action was not required.	
Dated_MA	AY 17TH, 2010
Signature	Luar C. Salozop
(I	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)
	JUAN C SALAZAR
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)