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102 3/8/m

COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Team Max of South Florida, Inc
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Carmen Cusido Name of Contact Person
Team Max of South Florida, Inc.
10850 SW 6 Street apt #3
Miami, Florida 33174 City/ State and Zip Code
henry Cusido a gmail com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Henry Cusido at (305) 305-4185 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 \$\ \text{Certificate of Status} \text{Status} \text{Certified Copy} & \text{Certificate of Status} \text{Certified Copy} & Certif
Mailing Address Street Address
Amendment Section Amendment Section
Division of Corporations Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle
rananassee, the session 2001 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

A	of		FILEU
(Name of Corporation as curre	ax of South	Florida Pent of State)	/2011/MAR -7 PM 4:
PIIO	000 18 127 ther of Corporation (if known		SECRETARY OF STA TALLAHASSEE.FLO
Pursuant to the provisions of section 607,1006 amendment(s) to its Articles of Incorporation:	o, Florida Statutes, this <i>Flor</i>	ida Profit Corporatio	on adopts the following
A. If amending name, enter the new name of	the corporation:		
name must be distinguishable and contain t abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp." "Inc."	or "Co". A profess	ional corporation
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREE</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC			
D. If amending the registered agent and/or renew registered agent and/or the new regis		Florida, enter the na	me of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street ada	lress)	
	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered as		accept the obligation	s of the position.
Si	ignature of New Registered A	Agent, if 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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
VP	· Henry Cusido	10850 SW 6 St #3 Miami, FL 33174	_ Ø Add □ Remove
			_ □ Add □ Remove
			_ ☐ Add _ ☐ Remove
	ding or adding additional Articles, enter additional sheets, if necessary). (Be spec		
<u>provisi</u>	nendment provides for an exchange, recons for implementing the amendment if		
(if n	ot applicable, indicate N/A)		

The date of each amendment(s	adoption: 2/25/2011
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
,	no more man 20 mays tyrer time manery free massy
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	voting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Signature <u> </u>	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	President (Title of person signing)