P11000059324

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
. PICK-UP	MAIT	MAIL
<u>لا</u> (Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies <u>·</u>	Certificates	s of Status
Special Instructions to	Filing Officer:	



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DIVISION OF CORPORATIONS

12 JUN -6 PM 1:58

Amend

JUN -: 6 2012 T. BROWN

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: MAJUME CORP DOCUMENT NUMBER: P11000059324 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: STEPHANNI VIANA Name of Contact Person MAJUME CORP Firm/ Company 12250 MENTA STREET, SUITE 202 Address ORLANDO, FL 32837 City/ State and Zip Code JORGE.0810@HOTMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: STEPHANNI VIANA Name of Contact Person 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

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of



MAJUME CORP

MAJOME CORP			_	PH 1. THE
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)	- M 1:58
P11000059324				
(Documen	nt Number of Corporation (if I	known)		_
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corpor	ation adopts the following	ng amendment(s) t
A. If amending name, enter the new na	me of the corporation:			
				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional		
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			·	_
C. Enter new mailing address, if appli				
(Mailing address <u>MAY BE A POST o</u>	<u>OFFICE BOX</u>)			_
				_
				-
D. If amending the registered agent an		ss in Florida, enter	the name of the	
new registered agent and/or the new	<u>w registered office address:</u> STEPHANNI VIA	NΙΛ		
Name of New Registered Agent				
	12250 MENTA ST		202	
	(Florida stree		00007	
New Registered Office Address:	ORLANDO		Florida 32837	_
	(City)		(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:	,		
I hereby accept the appointment as regis	tered agent. I am familiar k	ith and accept the ol	oligations of the position	
	Stephannif You	nn		
Si	gnature of New Registered A	gent, 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)

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: XChange	<u>PT</u> <u>J</u>	John Doe	· · ·
X Remove	<u>v</u> !	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	PRES	STEPHANNI VIANA	12250 MENTA STREET SUITE 202 ORLANDO, FL 3237
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove	_		
6) Change Add Remove			

f amending or adding additional Articates additional sheets, if necessary).	(Be specific)					
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				_,	 	
						_
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassific ndment if not co	cation, or co ontained in	ancellation the amend	of issued s ment itself:	hares.	
						_

The date of each amendment(s) a	doption: 06/01/12
Effective date <u>if applicable</u> : 06	6/01/12
<u>ichippitulit</u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 06/01/	′12 /
Signature	tethanny Diano
(Ву а с	director, president or other officer - if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
ирроп	STEPHANNI VIANA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)