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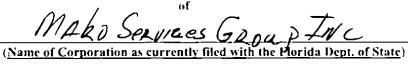
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## COVER LETTER

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|  | COVER LETTER   |                    |
| ΓO: Amendment Section Division of Corporations   |  | 专                  |
| NAME OF CORPORATION: MARO COLUMENT NUMBER: P12000  | Services Gaoup -INC  | BIT MON 16 PAID 18 |
| DOCUMENT NUMBER: <i>P12000</i>   | 094950   | <b>~</b>           |
| The enclosed Articles of Amendment and fee are sub   | omitted for filing.  |                    |
| Please return all correspondence concerning this mate  | Name of Contact Person   |                    |
|  | Firm/ Company  85 107 Ave N  Address   |                    |
|  | NADLOS-FL 34/08  |                    |
| E-mail address: (to be use   | City/ State and Zip Code  y @ y  |                    |
| For further information concerning this matter, please   | e call:  |                    |
| RICARdo Person Name of Contact Person  | at ( 30 \( \) 5/0 - 9672  Area Code & Daytime Telephone Number   |                    |
| Enclosed is a check for the following amount made p  | payable to the Florida Department of State:  |                    |
| \$35 Filing Fee  | □\$43.75 Filing Fee & □\$52.50 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 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





(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:

| iame must be distinguishable and contain the we  | Tout on of S.W. F.       | "incorporated" or the abbreviat   |
|--|--------------------------|-----------------------------------|
| Corp.," "Inc.," or Co.," or the designation "Cor<br>ord "chartered," "professional association," or th |                          | l corporation name must contain   |
| . Enter new principal office address, if applicab  | ole:                     | 995 20th Ave SE                   |
| <sup>p</sup> rincipal office address <u>MUST BE A STREET AL</u>  | ODRESS )                 | 995 20 Ave SE<br>1A plos-FL 34117 |
| . Enter new mailing address, if applicable:  |                          | man not A. C.T.                   |
| (Mailing address MAY BE A POST OFFICE B  | <u> </u>                 | VAPleS-FL 3417                    |
|  | /                        | VADOS-FL 3417                     |
| Name of New Registered Agent   | (Florida street address) |                                   |
| New Registered Office Address:   |                          | , Florida                         |
|  | (City)                   | , Florida<br>(Zip Code)           |
|  |                          |                                   |
| New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.   |                          | bligations of the position.       |

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:<br><u>X</u> Change    | <u>PT</u> <u>John</u>  | <u>Doc</u>            |  |
|--------------------------------|------------------------|-----------------------|--|
| X Remove                       | <u>V</u> <u>Mike</u>   | <u>Jones</u>          |  |
| X Add                          | <u>SV</u> <u>Sally</u> | Smith                 |  |
| Type of Action (Check One)  1) | Title  P               | Name<br>HetaBATISTASR | Address  2995 20Th Ave SE  NA ples, FL 34117 |
| Remove 2) X Change Add         | <u>VP</u>              | Hector Botista JR     | 2995-20# Ave St<br>NAPles-FL 34/17           |
| Remove 3 ) Change Add Remove   | 7_                     | Hector BATISTA IR     | 2995 20 Ave St<br>NAPLES - FL 34/17          |
| 4) Change Add Remove           | <u>VP</u>              | Hector Batista SR.    | 2995 20th Ave SE<br>Naplos-FL-3417           |
| 5) Change Add Remove           |                        |                       |  |
| 6) Change Add Remove           |                        |                       |  |

|                       | ding additional Article heets, if necessary). ( |                                       | <u>here</u> :                         |                   |         |
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| <u>f an amendment</u> | provides for an exchan                          | ge, reclassificatio                   | n, or cancellat <u>i</u> on           | of issued shares, |         |
|                       | plementing the amend the indicate N/A)          | ment if not contai                    | ned in the amend                      | lment itself:     |         |
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| The date of each amendment(s) ad  | option:   | , if other than the                        |
|---|---|--|
| date this document was signed.  | ulahala   |  |
| Effective date <u>if applicable</u> :                                     | (no more than 90 days after amendment file d  | lata)                                      |
|   | (no more man so days after amenament fue a  | uie)                                       |
| Note: If the date inserted in this be document's effective date on the De | lock does not meet the applicable statutory filing requirempartment of State's records.                                 | nents, this date will not be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )  |  |
| The amendment(s) was/were ado by the shareholders was/were sur            | pted by the shareholders. The number of votes cast for the efficient for approval.                                      | amendment(s)                               |
|   | roved by the shareholders through voting groups. The folloeach voting group entitled to vote separately on the amendate |  |
| "The number of votes cast   | for the amendment(s) was/were sufficient for approval   |  |
| by  | (voting group)  |  |
|   | (voting group)  |  |
| ☐ The amendment(s) was/were ado action was not required.                  | pted by the board of directors without shareholder action ar  | nd shareholder                             |
| ☐ The amendment(s) was/were ado action was not required.                  | pted by the incorporators without shareholder action and sh   | archolder                                  |
| Dated   | 1/9/2017  |  |
| Signature   | Hester Tatales,   |  |
| ` •   | rector, president or other officer - if directors or officers ha  |  |
|   | 1, by an incorporator – if in the hands of a receiver, trustee, ed fiduciary by that fiduciary)                         | or other court                             |
|   | Hector BATISTA  | Se,  |
|   | (Typed or printed name of person signing)   | /  |
|   | President/2   | rector                                     |
|   | (Title of person signing)   |  |