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Special Instructions to	— Filina Officer:	
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: MAXIMA PROPE	RTY MANAGEMENT IN	C		
DOCUMENT NUMBI			<u></u>		
	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
į.	AARON JOSEPH ALAMAR	Y.			
_		Name of Contact Persor	1		
?	MAXIMA PROPERTY MANAGEMENT INC.				
-		Firm! Company	· · · · · · · · · · · · · · · · · · ·		
2	20600 NW 47TH AVE	, .			
-		Address			
?	MIAMI, FL 33055				
_		City/ State and Zip Code	<u></u>		
AARO	N@MAXIMAMGMT.COM	1			
	•	sed for future annual report	notification)		
		·			
For further information	concerning this matter, pleas	se call:			
AARON JOSEPH AL:	MARY	954 at (	655-9612		
AARON JOSEPH ALAMARY  Name of Contact Person  Area Code & Daytime Te		de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Fiting Fee & Certificate of Status	□343.75 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 Division of Corporations P.O. Box 6327 Tallahassec, 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 οť

MAXIMA PROPERTY MANAGEMENT INC.			
(Name of Corporation as current	ly filed with the Florida Dept. of	State)	
P14000006148			
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	: Florida Profit Corporation adopt	s the following amendment(s) to	
A. If amending name, enter the new name of the corporation:			
N/A		The new	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or word "chartered," "professional association," or the abbreviation	"Co", A professional corporation	ed" or the abbreviation	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		
D. If amending the registered agent and/or registered office add		of the	
new registered agent and/or the new registered office address  N/A  Name of New Registered Agent	<u> </u>		
	treet address)		
		• 1	
New Registered Office Address:	(City)	Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	it: with and accept the obligations of	the position.	
		2111 0	
Signature of New	Registered Agent, if changing	1	
Pana	1 of 4	<u> </u>	

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, 5V as an Add.

Example: - <u>X</u> Change	<u>PT</u>	John Do	<u>oē</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	<u>Sally Sr</u>	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	_	TAL DANIEL	20600 NW 47TH AVE
Add				MIAMI GARDENS, FL 33055
X Remove				
2) Change		·•-•		
Add				
Remove				
3 ) Change	<del></del> -	<del></del>		
Add				
Remove				
4) Change		_		
Add				<u></u>
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	ng mere.			
		···			<del></del>
N/A					···-
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F. If an amendment provides for an excl	hange, reclassificati	on, or cancellati	ion of issued s	hares,	
provisions for implementing the ame (if not applicable, indicate N/A)	indment if not conti	aine <u>d in the ame</u>	nament itseji)	<u>.</u>	
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N/A				<u>_</u>	<u>-</u>
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	9/1/207	
The date of each amendment(s) as date this document was signed.	loption:	, if other than the
oate this document was signed.  9/1/1	7	
Effective date <u>if applicable</u> :		
<del></del>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amenda flicient for approval.	nem(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following stee each voting group entitled to vote separately on the amendment(s):	atement
	for the amendment(s) was/were sufficient for approval	
bv	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and share opted by the incorporators without shareholder action and sharehold.	
action was the required.		
9/1/2017 Dated		
selecte	aregue, president or other officer - if directors or officers have not led, by an incorporator - if in the hands of a receiver, trustee, or other ted fiductory by that fiduciary)	
	AARON JOSEPH ALAMARY	
	(Typed or printed name of person signing)	
	TREASURER	
	(Title of person signing)	<del></del>