5/6/2014.



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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: MAXIMA CORP DOCUMENT NUMBER: P14000029305 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **NELSON ODELLA** Name of Contact Person MAXIMA CORP Firm/ Company 6187 NW 167 ST STE H20 Address HIALEAH FL, 33015 City/ State and Zip Code LENSUR@LIVE.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 439-0246

Area Codc & Daytime Telephone Number NELSON ODELLA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Yee □\$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 Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tellphassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

	Articles of Amendme	nt	14 MY -6
	to Articles of Incorporate	lon	
MANUMA CODD	of		b 12
MAXIMA CORP		· · · · · · · · · · · · · · · · · · ·	
(Name of Corporation as current P14000029305	tly filed with the Florida D	ept, of State)	- FH
(Document Numb	er of Corporation (if known)		<u> </u>
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	lorida Statutes, this <i>Florida i</i>	Profit Curporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the	he corporation:		
			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "(word "chartered," "professional association," or	Corp." "Inc," or "Co". A	npuny," or "incorporated" or the professional corporation name mus	abbreviation it contain the
B. Enter new principal office address, if application of the address MUST BE A STREET			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE			
 If amending the registered agent and/or registered agent and/or the new registered. 		prida, enter the name of the	
Name of New Registered Avent			
	(Florida street addres	1)	
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registered age	nt. I am familiar with and a	ecopt the obligations of the position	•
Signature o	of New Registered Agent, if c	hanging	

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 us Remove, and Sally Smith, SV as an Add.

X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	S	CRYSTAL SALOMON	6875 W 2ND CT
Add			HIALEAH FL, 33014
Remove			
2) Change	T/S	GOMEZ RUSSO MAURO	13360 SW 46 CT
Add			MIRAMAR FL, 33027
Remove			
3) Change	<u>P</u>	GOMEZ EDGAR A	13360 SW 46 CT
✓ ∧dd			MIRAMAR FL, 33027
Remove			- Additional and the second se
4) Change			
Add			
Remove			
5) Change			
Add Add			
Remove			
6) Change			
Add		·	
Remove			

(Attach additional sheets, if nacessary).	i <u>cles, enter change(s) here</u> : (Be specific)
DD EIN : 46-5428287	
	- William Control of the Control of
Francisco Control Cont	No. to
	Mark Wall
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, underent if pot contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, inducent if pot contained in the amendment itself:
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If an amendment provides for an exch provisions for implementing the ame: (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if pot contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, adment if pot contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

. . . .

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The date of each amendmen	t(s) adaption: 05/06/2014	if other than the
date this document was signed		_
Effective date if applicable:	05/06/2014	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ero sufficient for approval.	
	te approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the umendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
- - -	(valing group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated_05/0	06/2014	
Dated Signature	Quin	_
<u></u> (F	ly 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	
a	ppointed fiduciary by that fiduciary)	
	CRYSTAL SALOMON	
	(Typed or printed name of person signing)	_
	SECRETARY	
	(Title of person signing)	_