Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000194304 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : TIMELINE BUSINESS CENTER LLC

Account Number : I20150000034 Phone : (239)344-7417

Fax Number : (888)344-7262

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_evandrofabril@gmail.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN MAXIMO CARPET INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

A. RAMSE
 11N - 6 5050

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation

FILED

MAXIMO CARPET INC

2022 1111

	MAXIMO CARPETT	.,,,	2022 JUN -3	PM 2. 21
(Name of Corpora	tion as currently filed	with the Florida	Dept. of State) 111 21 24 - 1
	P15000038226	-	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	[27] \$24.6
(Doce	ument Number of Corpo	oration (if known)		 • - • • • • • • • • • • • • • • • •
ursuant to the provisions of section 607.1006, Flori s Articles of Incorporation:	da Statutes, this <i>Florid</i>	a Profit Corporati	on adopts the	following amendment(s
. If amending name, enter the new name of the	corporation:			
IAXIMO FLOORING INC				The new
ame must he distinguishable and contain the word " Inc.," or Co.," or the designation "Corp," "Inc chartered," "professional association," or the abb	c," or "Co". A profe			breviation "Corp.,"
. Enter new principal office address, if applicab Principal office address <u>MUST BE A STREET AI</u>				·
				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	1 <u>0X</u>)			
. If amending the registered agent and/or regist new registered agent and/or the new registere		Florida, enter the	e name of the	
Name of New Registered Agent				
	(Florida street add	ress)		
New Registered Office Address:			. Florida	
HEN RESIDERED Office Address.	(Ciņ)	<u> </u>	, FIORIOS_	(Zip Code)
•				
ew Registered Agent's Signature, if changing Reserved agent.	egistered Agent: I am familiar with an	d accept the oblige	itions of the po	sition.
		·		
Sig	nature of New Register	ed Agent, if changi	ing	
heck if applicable				

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
i) Change			
Add			
Remove			
2) Change			
Add			
Remove Change		·	
Add			
Remove			
4) Change		·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

L. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	. ,
•	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	,
· · · · · · · · · · · · · · · · · · ·	
	•

•

.

	06/02/2022
The date of each am	endment(s) adoption:, if other than
date this document w	
	06/02/2022
Effective date <u>if app</u>	
	(no more than 90 days after amendment file date)
Note: If the date ins document's effective	erted in this block does not meet the applicable statutory filing requirements, this date will not be listed as date on the Department of State's records.
Adoption of Amend	ment(s) (<u>CHECK ONE</u>)
The amendment(s) action was not req	was/were adopted by the incorporators, or board of directors without shareholder action and shareholder aired.
	was/were adopted by the shareholders. The number of votes cast for the amendment(s) is was/were sufficient for approval.
must be separatel	was/were approved by the shareholders through voting groups. The following statement of provided for each voting group entitled to vote separately on the amendment(s): of votes cast for the amendment(s) was/were sufficient for approval
by	
: · · ·	(voting group)
	06/02/2022
Dat	
Sig	nature Enoudro to I
J	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	EVANDRO FABRIL
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

thc

the