P15000043862

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JAN - 5 2017

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	rion: Maxter Buildi	ING MAINTENANCE, IN	C		
DOCUMENT NUMBER	D15000043862				
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.			
Please return all correspon	ndence concerning this mat	ter to the following:			
10	HN GIRALDO				
****	Name of Contact Person				
	Firm/ Company				
P.C	P.O BOX 951148				
Address					
LA	KE MARY, FL 32795				
		City/ State and Zip Code	e		
maxterbu	iildingmaintenance@gmai	l.com			
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
JOHN GIRALDO		at (687-3421		
Name of C	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amendi Divisio P.O. Bo	ment Section n of Corporations ox 6327 ssee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SEGRETARY OF SIGNIFICATION OF CORECTOR.

(Name of Corporation as current	tly filed with the Florida Dept. of State)
15000043862	
(Document Number of	of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
I/A	The new
ame must be distinguishable and contain the word "corporati Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the "P.A."
. Enter new principal office address, if applicable:	N/A
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 951148
	LAKE MARY, FL 32795
o. If amending the registered agent and/or registered office addresses registered agent and/or the new registered office addresses.	
Name of New Registered Agent	
(Florida s	treet address)
V D : 100 444	- 1
New Registered Office Address:	(City) (Zip Code)
lew Registered Agent's Signature, if changing Registered Ager	**

Signature of New Registered Agent, 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: X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	С	Alexander Garcia Caycedo	792 Crcekwater Terrace
X Add			Apt 212
Remove			Lake Mary, Fl 32746
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific) N/A	
F. 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)	
N/A	

The date of each amendment(s) a	idoption:		if other than the
date this document was signed.	•		DIVISION OF CORPORAL!
Effective date <u>if applicable</u> :	(no more than 90 day	vs after amendment file date)	2017 JAN -3 AM 5: 58
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable epartment of State's records.	statutory filing requirements,	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The numufficient for approval.	nber of votes east for the amen	dment(s)
	proved by the shareholders through reach voting group entitled to vote		
"The number of votes cas	t for the amendment(s) was/were suf	ficient for approval	
by	(voting group)	••••••••••••••••••••••••••••••••••••••	
	(voting group)		
☐ The amendment(s) was/were accaction was not required.	lopted by the board of directors with	out shareholder action and sha	areholder
The amendment(s) was/were action was not required.	lopted by the incorporators without s	shareholder action and shareho	older
12/28/20 Dated	16		
Signature	Milh	h	
select	director, president or other officer – ed, by an incorporator – if in the har nted fiductory by that fiduciary)		
	JOHN GIRALDO		
	(Typed or printed name	e of person signing)	· · - · ·
	PRESIDENT		
	(Title of pe	erson signing)	