P1600012162

(Re	equestor's Name)	····
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE



COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: APPLE MAFFER	INC					
	BER: P16000012762						
	of Amendment and fee are su	bmitted for filing.					
Please return all corre	spondence concerning this ma	tter to the following:					
	ISIS ISABEL						
		Name of Contact Person	1				
	H&I TAX INVESTMENT C	CORP					
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·				
	1860 N PINE ISLAND RD. STE 109						
		Address					
	PLANTATION, FL 33322						
		City/ State and Zip Cod	e				
ISIS	TAX@AOL.COM						
	•	sed for future annual report	notification)				
For further information	n concerning this matter, pleas	se call:					
ISIS ISABEL		at (476-7100				
Name	of Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)				
Am Div P.C	iling Address endment Section ision of Corporations Box 6327 lahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

APPLE MAFFER INC				
(Name of Corporation as curren	tly filed with the Florida Dept. of State)			
P16000012762				
(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)			
A. If amending name, enter the new name of the corporation: APPLE MASTER INC	The new			
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the			
B. Enter new principal office address, if applicable:	5920 E. RIVERSIDE AVE			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	TAMARAC, FL 33321			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5920 E. RIVERSIDE AVE			
(Maning dadress MATI DEAT OST OTTICE BOX)	TAMARAC, FL 33321			
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address				
Name of New Registered Agent				
(Florida s	treet address)			
New Registered Office Address:	, Florida			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar				
	2016 SEC			
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.

X Change	PT	John Do	<u>e</u>					
X Remove	<u>v</u>	Mike Jo	nes					
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>					
Type of Action (Check One)	<u>Title</u>		<u>Name</u>				<u>Addres</u> s	
1) Change				·				
Add								
Remove								
2) Change					· • · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
Add								
Remove							 	
3) Change		_				_		
Add								
Remove								
4) Change		_						
Add								
Remove								
5) Change		_						
Add								
Remove								 · · · · · · · · · · · · · · · · · · ·
6) Chaman								
6) Change Add					· · · · ·	_		
Remove								

E. If amending (Attach add	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
		
<u> </u>		
<u>provisior</u>	nendment provides for an exchange, reclassification, or cancellions for implementing the amendment if not contained in the are not applicable, indicate N/A)	ation of issued shares, nendment itself:
•		
	·	

	02/15/2016	10 1
The date of each amendment(s) date this document was signed.		, if other than the
_	· 2/15/2016	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date w Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
_	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
02/15/20 Dated	016	
Signature	Matimhateveira	
	a director, president or other officer - if directors or officers have not been	
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court	
арро	ointed fiduciary by that fiduciary)	
	MATUZINHO M PEREIRA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	