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SECRETARY OF STALE
THE STANKES OF FLORIDA

DAY 2.3 2016 C. CARROTTERS

## **COVER LETTER**

\*

TO: Amendment Section Division of Corporations MACROS GROUP, INC NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DANIEL SANCHEZ Name of Contact Person MACROS GROUP, INC Firm/ Company 5191 ELPINE WAY Address PALM BEACH GARDENS, FL, 33418 City/ State and Zip Code danielsrincon01@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DANIEL SANCHEZ Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

	VI		
M	ACROS GROUP, INC		
(Name of Corporation	as currently filed with the Florida Dept. of State)		
	P16000026776		
(Documer	nt Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida S as Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the follo	wing amend	lment(s
A. If amending name, enter the new name of the corp	poration:		
SOLOSTEAM, INC		mt.	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A professional corporation name m		ion
, ,	N/A		
<ol> <li>Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDR.</li> </ol>	ESS)		_
. ,			_
			دنجر
Enter war weiling address if anniversely		- <u> </u>	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	79 20	) TI
		20 E	2
		<u> </u>	
		- <del></del> -	PH
If amending the registered agent and/or registered new registered agent and/or the new registered off		OR DE	IO: 55
Name of New Registered Agent N/A			
Name of New Negistered Agent			
<del></del>	(Florida street address)		
N D :			
New Registered Office Address:	, Florida, Florida	Zip Code)	_
		•	
·	•		
ew Registered Agent's Signature, if changing Regist			
hereby accept the appointment as registered agent. I a	am familiar with and accept the obligations of the position	<i>)n.</i>	
Signati	ure 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 Doe	•
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			<u></u>
Add			
Remove			·
2) Change			
Add			
Remove			
3) Change			
Add			_
Remove			
4) Change			
Add			
Remove			
5) Change			····
Add			<del></del>
Remove			<del></del>
6) Change			<del></del>
Add			
Remove			

Attach additiona	dding additional Art l sheets, if necessary).	(Be specific)				
			_			
					· · · · · · · · · · · · · · · · · · ·	
f an amendmen	t provides for an exc	hange, reclassif	cation, or cancel	ation of issued sha	res,	
provisions for i (if not appli	mplementing the ame cable, indicate N/A)	endment if not c	ontained in the a	mendment itself:		
	· · ·				•	
		<u> </u>			•	
		<del></del>		<del></del>		

	05/19/2016	
The date of each amendment(s) addet this document was signed.	option:	, if other than the
	9/2016	
Effective date if applicable:	(no more than 90 days after amendment file da	ne)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast for the artificient for approval.	mendment(s)
	roved by the sharcholders through voting groups. The follow each voting group entitled to vote separately on the amendm	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	oted by the board of directors without shareholder action and	J shareholder
☐ The amendment(s) was/were ado action was not required.	oted by the incorporators without shareholder action and sha	reholder
05/17/2016 Dated Signature	Men	<u>.                                    </u>
selected	rector, president or other officer – if directors or officers hav l, by an incorporator – if in the hands of a receiver, trustee, o ed fiduciary by that fiduciary)	
	DANIEL SANCHEZ	
	(Typed or printed name of person signing)	· · · · · ·
	PRESIDENT	
	(Title of person signing)	