

8/17/23, 9:41 AM

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H23000285647 3)))



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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

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Account Number : I20190000058  
Phone : (407)574-5009  
Fax Number : (407)574-5953

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

Email Address: mtorres@maximosolar.com, admin@fernandez-legal.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
MAXIMO SOLAR INDUSTRIES CORP.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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2023 AUG 18 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FL

01:8:10  
91  
2023



August 17, 2023

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

MAXIMO SOLAR INDUSTRIES CORP.  
BOX 3062  
AGUADILLA, PR 00603

SUBJECT: MAXIMO SOLAR INDUSTRIES CORP.  
REF: P16000049220

2023 AUG 18 AM 10:01  
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TALLAHASSEE, FL

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We received your electronically transmitted document. However, document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

All 4 pages of the amendment form must be included.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline FAX Aud. #: H23000285647  
Regulatory Specialist II Supervisor Letter Number: 923A00019051

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: MAXIMO SOLAR INDUSTRIES CORP.

DOCUMENT NUMBER: P16000049220

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eduardo J. Fernandez, ESQ

Name of Contact Person

Fernandez Legal

Firm/ Company

135 W. Central Blvd. Ste 300

Address

Orlando, FL 32801

City/ State and Zip Code

mtorres@maximosolar.com, admin@fernandez-legal.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL

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For further information concerning this matter, please call:

Eduardo J. Fernandez, ESQ.

at ( 407 )

5745009

Name of Contact Person

Area Code & 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)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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Articles of Amendment  
to  
Articles of Incorporation  
of

MAXIMO SOLAR INDUSTRIES CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000049220

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

The new

*name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**  
(Principal office address **MUST BE A STREET ADDRESS**)

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent

FERNANDEZ LEGAL

135 W. CENTRAL BLVD SUITE 300

(Florida street address)

New Registered Office Address:

ORLANDO

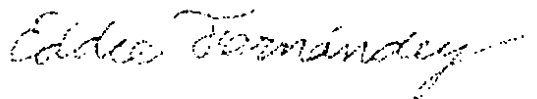
(City)

, Florida 32801

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*



Signature of New Registered Agent, if changing

**Check if applicable**

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

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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:**

|                 |           |                    |
|-----------------|-----------|--------------------|
| <u>X</u> Change | <u>PT</u> | <u>John Doe</u>    |
| <u>X</u> Remove | <u>V</u>  | <u>Mike Jones</u>  |
| <u>X</u> Add    | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u><br>(Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--------------------------------------|--------------|-------------|----------------|
| 1) <u>Change</u>                     | _____        | _____       | _____          |
| <u>Add</u>                           | _____        | _____       | _____          |
| <u>Remove</u>                        | _____        | _____       | _____          |
| 2) <u>Change</u>                     | _____        | _____       | _____          |
| <u>Add</u>                           | _____        | _____       | _____          |
| <u>Remove</u>                        | _____        | _____       | _____          |
| 3) <u>Change</u>                     | _____        | _____       | _____          |
| <u>Add</u>                           | _____        | _____       | _____          |
| <u>Remove</u>                        | _____        | _____       | _____          |
| 4) <u>Change</u>                     | _____        | _____       | _____          |
| <u>Add</u>                           | _____        | _____       | _____          |
| <u>Remove</u>                        | _____        | _____       | _____          |
| 5) <u>Change</u>                     | _____        | _____       | _____          |
| <u>Add</u>                           | _____        | _____       | _____          |
| <u>Remove</u>                        | _____        | _____       | _____          |
| 6) <u>Change</u>                     | _____        | _____       | _____          |
| <u>Add</u>                           | _____        | _____       | _____          |
| <u>Remove</u>                        | _____        | _____       | _____          |

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
*(no more than 90 days after amendment file date)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Adoption of Amendment(s) (CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

The number of votes cast for the amendment(s) was/were sufficient for approval  
 by \_\_\_\_\_  
*(voting group)*

Dated August 16, 2023

Signature

*Maximo Torres*

(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)

Maximo Torres

\_\_\_\_\_  
 (Typed or printed name of person signing)

President

\_\_\_\_\_  
 (Title of person signing)

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