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To;			
	Division of Corporations		
	Fax Number : (850)617-6380	⊼ sa	<u>_</u>
From:			
	Account Name : LAZARUS CORPORATE Account Number : I2000000019	FILING SERVICE, INC.	
	Phone : (305)552-5973	<u> </u>	_
	Fax Number : (305)675-5944		^
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**Ente	r the email address for this business	entity to be used to firm our	
	annual report mailings. Enter only one	email address please. **	بع
	Bmail Address:		

COR AMND/RESTATE/CORRECT OR O/D RESIGN MACFE USA CORPORATION

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Electronic Filing Menu

Corporate Filing Menu

Help

	Articles of A				
	to Articles of Inc				
MACFE USA CORPORATION	of				
	<u> </u>		_		
P16000075987	oration as currently	v filed with the Florida	Dept. of State)	-	
	Ocument Number of	f Corporation (if known)		<u>. </u>	
		•			
Pursuant to the provisions of section 607,1006, Fits Articles of Incorporation:	forida Statutes, this	Florida Profit Corporati	on adopts the following	ig amendin	ent(s) to
A. If amending name, enter the new name of	he corporation:				
	·····			The nev	v
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association." or			corporated" or the a poration name must	bbr e viation contain the	7 E
B. Enter new principal office address, if appli	cable:	_			
(Principal office address MUST BE A STREET	ADDRESS)				
					
				<u> </u>	
C. Enter new mailing address, if applies ble: (Mailing address MAY BE A POST OFFIC.	₹ BOX)	•	حنق 	를 물	-
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				: PR	\cup
D. If amending the registered agent and/or re- new registered agent and/or the new regist	istered office address	ess in Florida, enter the	name of the	9. Ell Ell	
	ireo omice audress:		I.e.	8	
Name of New Registered Agent				-	
	(Florida stree	at address)		-	
Nav Projetova (060 v. 111	,				
New Registered Office Address:		City)	Florida(Zip (Coda)	
			·	·	
Vary Designand Abanda Cianasa 25 h	D 14 14				
New Registered Agent's Signature, if changing hereby accept the appointment as registered age	Registered Agent:	ith and accept the obliga	ilons of the position.		
		Ū	•		
	Signature of New Re	wistered Agent if change			

Signature of New Registered Agent, if changing

(Allach additional shee Please note the officer; P = President; V= Vic Executive Officer; CFC held. President, Treasu Changes should be note a change, Mike Jones It	is, if nece director to e Presida D = Chief rer, Direc ed in the f eaves the	itle by the first letter of the office title: nt: The Treasurer: Some Secretary: Dominator: 1 Financial Officer. If an officer/director holds the would be FTD following many and Committee to the some second s	TR= Trustee; C = Chairman or Clerk; CEO = Chief more than one title, list the first letter of each office as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change,
X_Change	<u>PT</u>	John Doc	
∑ Remove	<u>Y</u>	Mike Jones	
_X Add	<u>\$V</u>	Sally Smitt:	
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Chonge			
Add			
Remove			
5) Change		~	
Add			
Remove			
δ) Change			
Add			
Remove			

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:

The shares of (II SHALL NOW						
President	apital stock of the						
					M(AMI, FL 331		40%
Vice President		1861 NW 5	RIVER DR	IVE, STE 1902	MIAMI, FL 331	125	40%
vice President	Japaz, Maria F.	1861 NW S	S RIVER DR	IVE, STE 1902	MIAMI, FL 331	125	20%
		_					
		_	_				
							
<u></u>							
If an amenda provisions to (if not ap	tent provides for or implementing opticable, indicate	an exchang the amenda : N/A)	ge, reclassific nent if not co	ation, or cance ntnined in the	diation of issued amendment its	d shares, Mi	
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LAZARUS CORPORATE

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