## P160000 87725

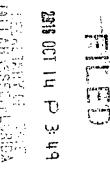
(Re	equestor's Name)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	MALTEZ FLORE	Z, CORP.	
DOCUMENT NUMBER: P160	00080725		
The enclosed Articles of Amenda		bmitted for filing.	
Please return all correspondence	concerning this ma	tter to the following:	
		Rolando Revelo	
		Name of Contact Perso	n
		Firm/ Company	<del> </del>
		943 Falling Water Road	
		Address	
		Weston, FL 33326	
		City/ State and Zip Coo	le
		jmaltez@maverick.com	n.sv
E-ma	l address: (to be us	sed for future annual report	notification)
For further information concernir	g this matter, pleas	se call:	
Rolando Revelo		786 at (	395-5209 ) ode & Daytime Telephone Number
Name of Contact	Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for the follow	ving amount made	payable to the Florida Dep	artment of State:
	.75 Filing Fee & tificate 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		Ameno Divisi Cliftor	Address dment Section on of Corporations n Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

	0.				
	MALTEZ FLOREZ, (	CORP.			
(Name of C	orporation as currently filed	with the Florida Dept	t, of State)		
	P16000080725				
	(Document Number of Corp	oration (if known)			
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6, Florida Statutes, this <i>Florid</i>	la Profit Corporation ac	dopts the fo	llowing ame	endment(s) to
A. If amending name, enter the new name	of the corporation;				
MALTEZ FLORES, CORP.				The	new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	n "Corp," "Inc," or "Co".	A professional corpore		the abbrev	viation
B. Enter new principal office address, if a (Principal office address MUST BE A STRE			<del></del>	<u></u>	<del></del>
C. Enter new mailing address, if applicabe (Mailing address MAY BE A POST OF)  D. If amending the registered agent and/o	FICE BOX)	Florida, enter the nar	ne of the		
new registered agent and/or the new re	gistered office address;				
Name of New Registered Agent				<del></del>	
	(Florida street ad	dress)		<del></del>	
	(7.107.144.51.1007.444.				
New Registered Office Address:	(City)		_, Florida	(Zip Code)	
New Registered Agent's Signature, if chan I hereby accept the appointment as registered		nd accept the obligation	as of the po	sition.	
	Signature of New Registo	and Agant if shows:	<del>Ž</del>	<u> </u>	
	Signature oj New Kegisto	reu Ageni, ij changing		100 M	ή

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1)Change		_		
Add				
Remove				
2) Change		<b>_</b>		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change		~		
Add				
Remove				

If amending or adding addit Attach additional sheets, if ne	cessary). (Be specific)	ge(s) here.		
	<del> </del>			<u> </u>
	<del></del>			-
				<del></del>
	101			
If an amendment provides for provisions for implementing the provisions for implementing the provides for implementing the pro	g the amendment if not co	cation, or cancellation ontained in the amend	of issued shares, ment itself:	
(if not applicable, indica	ate N/A)			
	·			.**
	<del></del>			
·	·			
			****	•

The date of each amendment(s) adoption:
Effective date <u>if applicable</u> :
(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 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 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
hy
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 10 7 16 Signature
(By a director, president of other officer – if directors or officers have not been solected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Jorge Maltez
(Typed or printed name of person signing)
President
(Title of targen pigning)