P18000006107

(Requestor's Nam	e)		
(Address)			
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(City/State/Zip/Ph	one #)		
PICK-UP WAIT	MAIL		
(Business Entity N	Name)		
(Document Number)			
	ites of Status		
Special Instructions to Filing Officer: DONFALD GI AUTHORITH AUCC	3/19/18 1/10/10/10/10		





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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: MAHO CORP DOCUMENT NUMBER: _ <u>P 18000006107</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 1515 N FEDERAL HWY
Address

130CA RATON FC 33432

City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DONFRED GONTOW at (954) 673-1424

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 & □\$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 Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MAHD CORP	
<u>.</u>	filed with the Florida Dept. of State)
P18000006107	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	TR & T
	05 10
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	ign -
D. If amending the registered agent and/or registered office address	
new registered agent and/or the new registered office address:	1 00 00
Name of New Registered Agent	<u> (acron</u>
9101 SAMPC	E RO CORAL SPRINGS FL 3306
(Florida stre	et address)
New Registered Office Address:	, Florida
((City) (Zip Code)
Now Desistant Assess? Signature if shough Desistant Assess.	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am fanifian (Th and accept the obligations of the position.
Signature of New Re	egistered Agent, if changing
į,	

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	PT John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	ones .	
X Add	SV Sally S	mith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PT	ALFONSO GUILLEUMA	451 SE 8 EN LOT 151 HOMESTOADEL
- Add		•	2423 NE 18300 ST NMIAMI PC 33160
Remove			
2) Change			
X_ Add	V	DONFRED GERTON	9101 SAMPLE RO CONAL SAKING F 33065
Remove			
3) Chan;	:	· · · · · · · · · · · · · · · · · · ·	
Δdd			
Remove		_	
4) Change	PT	John Reves	2423 NE 183rd St
Add		<u> </u>	Miami, Fl
Remove		191	33100
5) Change			
5) Change Add			
Remove			
Kemove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
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THE STATE OF THE S	
f an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 03-14-2018	, if other than the
date this document was signed.	
Effective date if applicable: 03-14-2018 (no more than 90 days after amendment file d	
(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	nents, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follomust be separately provided for each voting group entitled to vote separately on the amended	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action ar action was not required.	nd shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sh action was not required.	areholder
Dated	
(By a director, president or other officer – if directors or officers ha	ave not been
selected, by an incorporator – if in the hands of a receiver, trustee,	or other court
appointed fiduciary by that fiduciary)	
Don Fred Garon (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
$\mathcal{U}^{\mathcal{P}}$	
(Title of person signing)	