## P180000/8807

(Requestor's Name)
(Nequestor 5 Name)
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(City/State/Zip/Phone #)
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## COVER LETTER

TO:	Amendment Section
	Division of Corporations

Division of Corporations	
NAME OF CORPORATION: MAYE	EN WATERPROOFING INC
DOCUMENT NUMBER: P18000018	
The enclosed Articles of Amendment ar	nd fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
RROBIEL PERA	SERRET
·	Name of Contact Person
MAYLEN WAT	ERPROOFING INC
	Firm' Company
9740 NW 10 ST	
	Address
PEMBROKE PIX	NES. FL 33025
	City/ State and Zip Code
E-mail addre	ress: (to be used for future annual report notification) natter, please call:
ROBIEL PERA SERRET	274 8736
Name of Contact Person	at (954 ) 274 8736  Area Code & Daytime Telephone Number
Enclosed is a check for the following an	nount made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 File Certificate	
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Building

TO:18502456897 FROM:7869552717

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Articles of Amendment to Articles of Incorporation of

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MAYLEN WATERPROOFING INC	
(Name of Corporation	as currently filed with the Florida Dept. of State)
P18000018807	
(Docume)	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida S is Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	<u>oration:</u>
	The new
	corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the previation "P.A."
3. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDR</u>	ESN)
	<del>-</del>
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
). If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Ztp Code)
New Registered Agent's Signature, if changing Regist	oroil Agent
	m familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page:

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.

X Change	PT	John Doc	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	ROIBEL PERA SERRET	101 WEST 9 ST # 15
X Add			HIALEAH, FL 33010
Remove			
2) Change		_	
Add			<u></u>
Remove			
3 ) Change			<u> </u>
Add			
Remove			
4) Change		_	
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

10/3/2018 09:01 AM PDT TO:18502456897 FROM:7869552717 Page: 6

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
<del></del>	
	——————————————————————————————————————
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	numeric it not contained in the amending tensor.
•	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.	)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
bv	· · ·	
<u> </u>	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholde	r
The amendment(s) was/were action was not required.  Dated	adopted by the incorporators without shareholder action and shareholder	
(I)v sele	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other couronted fiduciary by that fiduciary)	1
	ROBIEL PERA SERRET	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	