P18000038651

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(Document Number)
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COVER LETTER

TO: Amendment Section **Division of Corporations**

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NAME OF CORPORATION:	Maxi Services LE (Drp	_
DOCUMENT NUMBER:	P 18000038651	_

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

Please return all correspondence concerning this matter to the following:

Damal Carrizales Name of Contact Person

Firm/ Company 9725 Containe bloar blod, Apt 209 Address Mianni, FL 33172 City/State and Zip Code

Laam 83 @ 5 mail. Com E-mail address: (to be used for future annual report notification) \checkmark

For further information concerning this matter, please call:

Daniel Carrielas Name of Contact Person

at (<u>786</u>) <u>450</u> <u>1394</u> Area Code & Davtime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ \$35 Filing Fee

□S43.75 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 Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to	
Articles of Incorporation	
Maxi Services LE Corp	Elevide Dent of State)
(Name of Corporation as currently filed with the l	riorida Dept. or State)
P 18 0000 3865 1 (Document Number of Corporation (if)	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Co</i> its Articles of Incorporation:	orporation 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," "company." "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professi word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable:	or incorporated or the approvation ional corporation name must contain the
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	· · · · · · · · · · · · · · · · · · ·
	14. B
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, e new registered agent and/or the new registered office address:	enter the name of the
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	, Flerida (Zip Code)
New Registered Office Address: (City)	(Zip Code)
<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept to	he obligations of the position.

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Signature of New Registered Agent, if changing

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>	John Do	<u>ec</u>			
X Remove	<u>v</u>	Mike Jones				
<u>X</u> Add	<u>SV</u>	<u>Sally Sn</u>	nith			
<u>Type of Action</u> (Check One)	<u>Title</u>		<u>Name</u>			Address
1) Change			Laura	Espinoza	_	9725 fontance bload
Add						blud, APT209.
Kemove						Miami, FL 33172
2) Change		_		·····	-	
Add						
Remove						
3) Change		_			-	
Add						
Remove						
4) Change		-			-	
Add						
Remove						
5) Change		_			-	
Add						
Remove						
6) Change					-	
Add						
Remove						

E. If amending or adding additional Articles, enter change(s) here:

· (Attach additional sheets, if necessary). (Be specific)

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

Page 3 of 4

The date of each amendment(s) adoption:O4/26/2018, if other than
date this document was signed.
Effective date if applicable: 04/26/2018
Effective date if applicable: 04/26/2018 (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 document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
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"
by"
 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.
Dated05/07/2018
Dated2019 Signature
(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)
Dana/ Carrizalas
(Typed or printed name of person signing)
President
(Title of person signing)

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