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Division of Corporations

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Account Number : I20080000061 Phone : (407)582-9830 Fax Number : (407)601-6393

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN MAFFRA SOLUTIONS CORP

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Help



Articles of Amendment to Articles of incorporation

of

MAFFRA SOLUTIONS CORP			
(Nume of	Corporation as currently filed	with the Florida Dept. of State)	
P18000038663			
	(Document Number of Corpo	oration (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Smittes, this Florida	z Profit Curporation adopts the followi	ng amendineni(s) to
A. If amending name, enter the new na	me of the corneration:		
MAFFRA BUSINESS CORP			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co" "chartered," "professional association."	orp," "Inc," or "Ca". A profi	ny," or "incorporated" or the abbrevior sessional corporation name must confe	ion "Corp" iin the word
B. Enter new principal office address, i (Principal office address MUST BE A ST	f applicable:		
			· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address if appli			
(Mailing address MAY RE A POST (/FFICE BOX	······································	
	_		
D. If amending the registered agent an	d/or registered office address is	Florida, enter the name of the	
new registered agent and/or the new	v registered office address:		
Name of New Registered Agent	VANESSA MAFERA		<u></u>
	3622 MAIDECAIN ST		
	(Florida street ad		
New Registered Office Address:	CLERMONT	, Florida 34714	
THE WASHINGTON AND COME.	(Clny)	(2)	p Code)
New Registered Agent's Signature, it es I hereby accept the appointment as registed.	thanging Registered Agent: tered agent. I am jandlar with a	nci accept the obligations of the position	2021 JUN - I
x las	ussa_/noffi		一門9 議
	Signature of New Registe	ered Agent. if changing	50 C/
	1/ 1/		54 TO CO

Example:

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 D	<u>100</u>	
X Remove	V Mike J	ones .	
_X Add	<u>\$V</u> <u>Sally S</u>	<u>smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	LUCAS CAMILO MAFFRA	3622 MAIDENCAIN ST
Add		-	CLERMONT, FL 34714
X Remove 2) Change	P	VANESSA MAFFRA	3622 MAIDENCAIN ST
X Add			CLERMONT, FL 34714
Remove 3) Remove			
Add Remove			<u> </u>
4) Change			
Add			
5) Change			
Add			
Remove 6) Change	·		
Add			
Damous			

Attach <i>additional sh</i>	ling additional Art heets, if necessary).	(Be specific)				
			<u></u>			
	_					
						
					_	<u> </u>
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					-	
				····-		
provisions for imp	provides for an exc plementing the am ble, indicate N/A)	hange, reclassif endment if not o	ication, or cance contained in the	ellation of issued amendment its	d shares. elf:	
						

	05/31/2021	
The date of each amendment(s) addate this document was signed.	Option:	, if other than the
N/A Effective date if applicable:		
	(no more shan 90 days after amendmens file a	late)
Note: If the date inserted in this blocked on the Dep	ock does not meet the applicable statutory filing requirer surtinent of State's records.	nents, this date will not be fisted as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted to the required.	sted by the incorporators, or board of directors without sha	areholder setion and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes east for the ficient for approval.	amendment(s)
The amendment(s) was/were appr must be separately provided for c	oved by the shareholders through voting groups. The followed by the shareholders through voting group entitled to vote separately on the amend	owing statement (ment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
ОУ	(voting group)	
(By a di selected appoint	ector, president or other officer - if directors or officers he, by an incorporator - if in the hands of a receiver, trustee, or diductary by that fiduciary) LUCAS CAMILO MAFFRA (Typed or printed name of person signing) PRESIDENT	
	(Title of nerson signing)	

2021 JUN -1 AN 3: 03