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COVER LETTER

TO: Amendment Section Division of Corporations

name of corporation: $_$	Maxx d Out Inc.
DOCUMENT NUMBER:	P20000040818
The enclosed Articles of Amendment and f	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
	Name of Contact Person
	Firm/ Company
23	040 NW 152 nd 5t. Address
	Address
M	liami - Gardens Fl. 33054
	City/ State and Zip Code
E-mail address:	(to be used for future annual report notification)
For further information concerning this man	tter, please call:
Damikia Cox Name of Contact Person	at (<u>786</u>) <u>389 - 3638</u> Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	ant made payable to the Florida Department of State:
☑ \$35 Filing Fee ☐\$43.75 Filing Certificate of	·
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Maxx'd Out	Inc.
(Name of Corporation as currentl	ly filed with the Florida Dept. of State)
(Document Number of	C4() 8 8 of Corporation (if known)
(Document Number o	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NA	The _new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". Contains a contain the master of the contains and the contains a contain the contains and the contains a contain the contains and the contains a contain the contain the contains a contain the contain the contains a contain the contai	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
	1820
C. Fatar and addition of an Early	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A S
	2:
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent NA	
(Florida str	reet address)
New Registered Office Address:	. Florida
New registered office rawies.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar to	
N/A	egistered Agent, if changing
Signature of New R	egistered Agent, if changing
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(c), F.S.

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 <math>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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Dic	Geno Oliveros	2340 NW 152 nd st
Add			Miami - Gardens Fl. 33054
Remove			
2) Change	·		
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>addition</i>	al sheets, if n	ecessary). (Be	enter change(se specific)	sj nere:			
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(if not app	olicable, indici	ate N/A)					
		AIN					
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The date of each amendment(s) date this document was signed.	idoption: 7/1/2020), if other than th
_	7/1/2020	
Effective date <u>if applicable</u> :	(no more than 90 days after ame	
Note: If the date inserted in this document's effective date on the I		ling requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☑ The amendment(s) was/were acceptance acceptance was not required.	opted by the incorporators, or board of directors	s without shareholder action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	opted by the shareholders. The number of vote ufficient for approval.	s cast for the amendment(s)
	proved by the shareholders through voting grour reach voting group entitled to vote separately of	
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"The number of votes can		
DatedSignature(By a	t for the amendment(s) was/were sufficient for a (voting group) 7/2/2020 Lirector, president or other officer – if directors	or officers have not been
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DatedSignature(By a select	for the amendment(s) was/were sufficient for a (voting group) 1/2/2020 director, president or other officer – if directors ed, by an incorporator – if in the hands of a rece	or officers have not been iver, trustee, or other court