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DIVISION OF CORPORATE ST

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COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: Lorenzo 1	tine Mrs Repaire S.	ervice Inc	
DOCUMENT NUMBER: POS 00 000	0473		
The enclosed Articles of Amendment and fee are su	ubmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
KLONAY LOVENZO Name	JR.		
/ Name	of Contact Person		
Lorenzo FIRE AND FI	Repain Service	Inc	
1944 Veronien SHOEMAR Ker BLUB.			
Fort AffERS, FA	23914.		
Lorenzo fines @ AD. E-mail address: (to be used for			
For further information concerning this matter, plea	ase call:		
Elional Lorenzo Ja.	at (<u>239</u>) <u>307</u>	9453.	
Name of Contact Person	Area Code & Daytime Tele	ephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depart	ment of State:	
\$35 Filing Fee \$Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street Address		
Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment

to

Articles of Incorporation of

Forenza fires and Repair Service IR.
(Name of Corporation as currently filed with the Florida Dept, of State)
POS 00000473
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
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, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent: LLIONAY LOTENZO JR. 1946 INDICA SHOENARKER BLVS.
New Registered Office Address: (Florida street address)
Fort Myers Florida 33916. (Clty) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
2_	Elionay Lorenzo Se	FORT YYURS , FL 33914	¥¥∏ Add ✓ X Remove
P_	Elional Coringo IR	1940 VERDNIER SHOEHARK Fort offer FC 33714	gr⊠ Add _ □ Remove
V P.	Elional Connes Je	1944 Verenien Stoe HARKE	Add Remove
	ing or adding additional Articles, enter ditional sheets, if necessary). (Be speci		
	<u></u>	,	
·			
	endment provides for an exchange, rec		
	ns for implementing the amendment if applicable, indicate N/A)	not contained in the amendment	itsell:
			
	***************************************		··· ·

The date of each amendment(s) ad	loption: 07/01/2013.
	(dale of adoption is required)
(no i	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were sur	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval
by	ng group)
(votin	ng group)
The amendment(s) was/were ado action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 07/16 Signature	2012. Ector, president or other officer – if directors or officers have not been
selected, l	by an incorporator – if in the hands of a receiver, trustee, or other court if fiduciary by that fiduciary)
Z	ELIONAY LOPENZO JR. (Typed or printed name of person signing)
	Presibent.
	(Title of person signing)