## P13000001217

(Red	questor's Name)	····-
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone #	7)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Name	<u>)</u>
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



100249820181

07/22/13--01005--009 \*\*35.00



## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: pr's renova	tions inc	<del></del>
DOCUMENT NUME	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	:
Please return all corres	spondence concerning this mat	tter to the following:	
	paulina restrepo		
. *		Name of Contact Person	1
		Firm/ Company	
	8759 white swan	dr unit 102	,
	Tampa FL 33614	Address	
	Tampa FL 33014	City/ State and Zip Code	
F		ONS /NC led for future annual report	O GMail. CON
For further information	n concerning this matter, pleas	se cali:	
Paulina Rest	repo	<sub>at (</sub> 813	<u>352 8720</u>
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 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)
Amo Divi P.O.	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as		Florida Dept. of State)
P13000001217		
(Documer	nt Number of Corporation (	(if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
pr's renovations inc	•	The new
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable:		8759 white swan dr unit 102
(Principal office address MUST BE A S	TREET ADDRESS )	tampa fl 33614
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8759 white swandr unit 192
		tampa fl 33614
D. If amending the registered agent an new registered agent and/or the new		
Name of New Registered Agent	paulina restrepe	0
	8759 white swr	n dr unit 102
	(Florida s	treet address)
New Registered Office Address:	tampa	, Florida 33614
	(City	(Zip Code)
1/1		with and accept the obligations of the position.

## 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.

Example: 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	p	julian valdez	8759 white swan dr unit 102
Add X Remove			
2) Change	р	paulina restrepo	
X Add			<del></del>
Remove 3) Change		· .	
Add			940 BB - 10 B - 10 C -
Remove			<del></del>
4) Change Add			
Remove			
5) Change		·	<u> </u>
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
<del></del>	
· · · · · · · · · · · · · · · · · · ·	
ovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

date this document was signed.	_, ii outer than the
Effective date if applicable: 7 18 2013	
(no more than 90 days after amendment file date)	-
Adoption of Amendment(s) (CHECK ONE)	•
☐ 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"  (voting group)	
☐ 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 was not required.	
7 16 2013	
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 figuriary by that fiduciary)	-
(Typed or printed name of person signing)	<b>-</b> -
Preside NT Julian's (Title of person signing)	HOM & M. Provenients