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DEC 0.3

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: SEVILLA'S HOM	E REMODELING CORP	
DOCUMENT NU	P19000087721		
The enclosed Artic	les of Amendment and fee are su	bmitted for filing.	
Please return all co	rrespondence concerning this ma	tter to the following:	
	SAUL E MATUTE SEVILL	A	
		Name of Contact Person	1
	SEVILLA'S HOME REMOD	DELING CORP	
		Firm/ Company	
	615 SIESTA KEY CIR APT	3313	
	 	Address	
	DEERFIEL BEACH, FL 334	141	
		City/ State and Zip Cod	<u> </u>
	saul_honduras86@alive.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	tion concerning this matter, please		
Nan	ne of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 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)
,A 1: P	Lailing Address Amendment Section Division of Corporations O. Box 6327 Callahassee, FL 32314	Amend Divisio The Co 2415 Y	Address Iment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810 ussee, F1, 32303

Articles of Amendment to Articles of Incorporation of

SEVILLA'S HOME REMODELING CORP

EVILLAS HOME REMODELING COR	C	the filed with the Disside Dant of States	
19000087721	Corporation as curren	tly filed with the Florida Dept. of State)	
	(Document Number	of Corporation (if known)	<u></u>
rsuant to the provisions of section 607.1 Articles of Incorporation:	006, Florida Statutes, this	s Florida Profit Corporation adopts the following	lowing amendment
If amending name, enter the new nar	ne of the corporation:		
/Λ			The new
me must be distinguishable and contain t nc.," or Co.," or the designation "Co hartered," "professional association," o	rp," "Inc," or "Co".	"company," or "incorporated" or the abbre A professional corporation name must c	viation "Corp.," ontain the word
Enter new principal office address, if applicable:		8096 MIZNER PARK LANE	
rincipal office address MUST BE A ST		BOCA RATON FL 33433	~
			TOO OCT
			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8096 MIZNER PARK LANE	28
		BOCA RATON, FL 33433	PH .
			PH 2: 5
			5
If amending the registered agent and new registered agent and/or the new		dress in Florida, enter the name of the	
	N/A	<u></u>	
Name of New Registered Agent		·· <u> </u>	
-	(Florida s	treet address)	
New Registered Office Address:	N/A	, Florida _	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). 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 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	LUZ P. VALENZUELA	8096 MIZNER LANE
X Add			BOCA RATON . FL 33433
Remove			
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)
N/A
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) N/A
N/A
N/A
N/A
N/A
N/A
N/A
N/A

OCTOBER 18, 2020 ____, if other than the The date of each amendment(s) adoption: _ date this document was signed. OCTOBER 20, 2020 Effective date if applicable: (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 the document's effective date on the Department of State's records. (CHECK ONE) Adoption of Amendment(s) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. 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 east for the amendment(s) was/were sufficient for approval (voting group) (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) SAUL E MATUTE SEVILLA (Typed or printed name of person signing) PRESIDENT (Title of person signing)