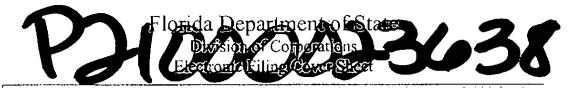
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210001752873)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ACCTSMART INC D.B.A. AVILAS ACCOUNTING SERVICES

Account Number : I20180000072 : (305)820-3200 : (305)820-2998 Fax Number

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

Email	Address:	<u>,</u>				

COR AMND/RESTATE/CORRECT OR O/D RESIGN L & V ALFONSO ELECTRIC INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

O SIMMU.

MAY 0 3 2021

Help

Electronic Filing Menu

Corporate Filing Menu

https://efile.suphiz.org/scripts/efilcovr.exe.

Articles of Amendment to Articles of Incorporation of

L & V ALFONSO ELECTRIC INC		
(Name of Con	poration as currently filed with the I	lorida Dept. of State)
P21000023638		
	(Document Number of Corporation (if I	known)
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Co	rporation adopts the following amendment(s
A. If amending name, enter the new name o	f the corporation:	
		_The new
name must he distinguishable and contain the w "Inc.," or Co" or the designation "Corp." "chartered." "professional association," or th	""Inc," or "Co". A professional co	corporated" or the abbreviation "Corp.," orporation name must contain the word
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	:: CE BOX)	
(Manning man and Market 2027), GOT GT 12		
		
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, e	nter the name of the
LIO	SBEL ALFONSO SILVA	
Name of New Registered Agent		
	(Florida street address)	
	(t 10) tale server land cos/	
New Registered Office Address:	(City)	, Florida
	·	,
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	ing Registered Agent: agent. I am familiar with and accept the	ne obligations of the position.
	Signature of New Registered Agent.	if changing
Charle if anninghia		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

H210001752873

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)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; $D \cdot Director$; 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	<u>PT</u>	John Do	<u>«</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>\$V</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				<u> </u>
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

H210001152873

(Attach additional sheets, if necessary).	(Be specific)
DD SECOND LAST NAME TO OFFIC	ER/DIRECTOR DETAIL: FULL NAME (LIOSBEL ALFONSO SILVA)
·	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

H210001752873

	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
•	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this dat Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholder actic	on and shareholder
■ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.	s) ·
	opproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	ni
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	, , , , , , , , , , , , , , , , , , , ,	
	(voting group)	
04/30/202 Dated Signature		
select	director, president or other officer — if directors or officers have not been led, by an incorporator — if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	ι
	LIOSBEL ALFONSO SILVA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	