

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : HOMMERDING ADVISORS LLC

Account Number : I20220000171 : (954)532-3842 Fax Number : (954)532-3847

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

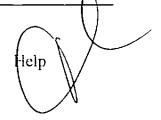
Email Address: \_\_\_CORPORATE@EAGLE-TAX.COM\_

## COR AMND/RESTATE/CORRECT OR O/D RESIGN KARDEC SPIRIT RENOVATION, INC

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Electronic Filing Menu

Corporate Filing Menu



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TO: Amendment Section

Tailahassee, FL 32314

## COVER LETTER

Division of Corporations				
NAME OF CORPORATION: KARDEC SPIRIT	RENOVATION, IS	√С 		
N04000008987 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	itter to the following	<b>;</b> :		
ALVIN A. HOMMERDING				
· · · · · · · · · · · · · · · · · · ·	(Name of Contac	t Person)		200
EAGLE TAX				2075
	(Fum/Comp	апу)		>)
5493 WILES ROAD, 105				۱ر.
	(Address	)		
COCONUT CREEK, FL - 33073				- -
	(City/ State and Z	ip Code)		
CORPORATE@EAGLE-TAX.COM				
E-mail address. (to be use	ed for future annual	report notificat	ion)	_
For further information concerning this matter, pleas	se call.			
ALVIN A. HOMMERDING		954	532-3842	
(Name of Contact Perso	on)	(Area Code	(Daytime Telephon	e Number)
Enclosed is a check for the following amount made	payable to the Flori	da Department	of State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Cer by is Cer (Ad	.50 Filing Fec tificate of Status tified Copy Iditional Copy is closed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment So Division of Co The Centre of	rporations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida	Dept. of State)	
N04000008987		
(Document Numb	er of Corporation (if k	(nown)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation.	es, this Florida Not F	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
		The ne
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporate	d" or the abbreviation "Corp." or "nc.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	)	ري ري
C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		, enter the name of the
Name of New Registered Agent:		
New Registered Office Address.	(F	londa street address)
		Florida
<del></del>	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept	the obligations of the position.
	mature of New Revis	ered 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)

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. XChange X Remove X Add	PT         John De           V         Mike Jo           SV         Sally Sr	ones .		
Type of Action (Check One)	Title	<u>Name</u>	Address	
l) Change Add	ACCT_	Rita C F B Araujo Souza	23158 Sandalfoot Plaza Dr Boca Raton, FL 33428	
x Remove				<u>2</u>
2) Change Add	ACCT	EDSON SANTOS DE SANTANA		7
Remove 3) Change Add Remove				 
4) Change Add				35
Remove  5i Change Add Remove				
6) Change Add	<del></del>			
E. If amending or addin (attach additional shee		cles, enter change(s) here. (Be specific)		
		<del></del>		

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	<del></del>
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The date of each amendment(s) 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 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.

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

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( Just on
by the chairmaryor vice chairman of the board, president or other officer-if directors ave not been selected, by an incorporator – if in the hands of a receiver, trustee, or their court appointed fiduciary by that fiduciary)
ZARA NANA
(Typed or printed name of person signing)