## P02000062185

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900409106649

09/30/20--01019--017 \*\*35.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: DAMAGE CONTI	COL, INC.			
	1BER: P02000062185				
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	respondence concerning this ma	tter to the following:			
	George Archer				
	<u></u>	Name of Contact Persor	)		
	DAMAGE CONTROL, INC.				
		Firm/ Company			
	2895 Oak Bluff Way				
		Address			
	OVIEDO, FL 32765				
City/ State and Zip Code					
	sunbiz@dc911.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat	ion concerning this matter, pleas	se call:			
George Archer		at (407	_) 416-7878	2	=
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number	_ 155	(J
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment of State:		AL THU PAIL
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy	SECKETALKY OF STA TALLAHAMSEEL FL	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

is enclosed)

## Articles of Amendment to Articles of Incorporation of

orida Dept. of State) nown)
poration adopts the following amendment(s) to
The new
orporated" or the abbreviation "Corp.," poration name must contain the word
2023 MAY 30 SECRETANA TALLAHA
ter the name of the
SEE FL
Marida
, Florida (Zip Code)
obligations of the position.

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)

Example:

\_\_\_\_ Remove

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.

X Change	PT	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	VP	James Apuzzo	2200 Winter Springs Blvd	_
Add			#106-221	_
X Remove			OVIEDO, FL 32765	-
2) Change				_
Add				<del></del>
Remove 3) Change		<u> </u>		-
Add				_
Remove			<u> </u>	2023
4) Change		_	CRET	2023 HAY 30
Add			AH	
Remove			75 C	₽ ;
5) Change		_	E. S.	PH 1: L7
Add				7
Remove				-
6) Change				_
Add				_

attach additional sheets, if necessary). (Be specif	îc)	NA			
		1			
	****				
	<u> </u>				
				<u> </u>	
an amendment provides for an exchange, recla					
orovisions for implementing the amendment if r (if not applicable, indicate N/A)	<u>iot contained ir</u>	the amendment in	<u>sself:</u>		
		λ1/.Δ			
		_/ <i>\\\\</i> _ <del>\\\</del>	-		_
		-/V/VT		SECH	9099 <b>,</b>
	_	-/V/VT		SECRETA TALL/H	9099 MAY
				SECRETARY C	PROPERTY OF
				SECRETARY OF STATE TALLAHASSEB, FL	PROPERTY OF THE S

The date of each amendment(s) adoption:	/ <b>/ / /</b> / /	10 at at a transition
date this document was signed.		, if other than the
Effective date if applicable:	than 90 days after amendment file date)	
(no more	Thun 40 days after amenament fue dates	
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's rec		Il not be listed as the
Adoption of Amendment(s) (CHECK ON)	<u>E</u> )	
The amendment(s) was/were adopted by the incorporate action was not required.	ors, or board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	ers. The number of votes east for the amendment(s)	
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group entities.		
"The number of votes east for the amendment(s)	was/were sufficient for approval	
by	"	
(voting group)		
05/25/23 Dated		
Signature		
	ner officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court luciary)	
George Archer		
(Typed or p	orinted name of person signing)	
President		2023 H SECH
(Title of pe	rson signing)	HAY 3
		O PH I
		1: 47 STATE E, FL

TIME