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JUN 1 5 2018
I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	AME	RICAN BEST GUTTERS	INC
DOCUMENT NUMBER:			
The enclosed Articles of Amendment	and fee are su	bmitted for filing.	
Please return all correspondence conc	erning this ma	tter to the following:	
	CARM	EN ROMERO	
		Name of Contact Person	1
	A&A N	IUL-T-SERVICES INC	
		Firm/ Company	
	79 LAS	BRISAS WAY	
		Address	
•	KISSIM	1MEE, FL 34743	
	-	City/ State and Zip Cod	e
	ААМИ	TSERVICES@GMAIL.CO	⊃M.
E-mail ad		sed for future annual report	
For further information concerning th JOSE J LIBREROS	is matter, pleas	se call: at (. 973-3519
Name of Contact Person		at (Area Co) de & Daytime Telephone Number
Enclosed is a check for the following			·
	Filing Fee & ate 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

AMERICAN BEST GUTTERS INC

(Cin) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: NA The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co", A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) NA NA Name of New Registered agent and/or registered office address: NA (Florida street address) NA (Florida street address) NA (Florida street address) NA Florida (Cin) (Cin)	(<u>Name</u>	of Corporation as currer	itly filed with the Flor	ida Dept. of State)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: NA The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address MAY BE A POST OFFICE BOX) NA [NA [Florida street address] NA [Florida street address] NA [Florida street address] NA [Florida street address]		P0400007569	7	
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The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: NA NA (Florida street address) NA NA Florida Florida Florida Florida Florida Florida		1006, Florida Statutes, th	is Florida Profit Corpo	pration adopts the following amendment(s) t
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(Florida street address) New Registered Office Address: NA , Florida	Name of New Registered Agent			
New Registered Office Address: NA , Florida, Florida		<u></u>		
New Registered Office Address:, Florida,			street address)	
	New Registered Office Address:		(Cin.)	
(City) (Exp Code)			(Ca)7	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	t hereby accept the appointment as regist	tered agent. I am familia	r with and accept the o	bligations of the position.
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar with and accept the obligations of the position.				
		Signature of New	Registered Agent, if ch	hanging

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
l) Change	VP	ALVAREZ, OLGA M	5525 LAKE LIZZIE DR
X Add			SAINT CLOUD FL 34771
Remove			·
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	 _	_	
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)				
NA					
		 			
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lf an amendment provides for an exch	ange, reclassificati	on, or cancellat	ion of issued s	hares,	
If an amendment provides for an exch provisions for implementing the amen	ange, reclassificati	on, or cancellat	ion of issued s endment itself	hares,	
(if not applicable, indicate N/A)		on, or cancellar ained in the am	ion of issued s endment itself	hares,	
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A) N.		on, or cancellar	ion of issued s endment itself	<u>:</u>	
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(if not applicable, indicate N/A)		ion, or cancellar	ion of issued s	hares,	

	06/07/2018	
The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.	04/07/2010	
Effective date <u>if applicable</u> :	06/07/2018	
	(no more than 90 days aft	er amendment file date)
Note: If the date inserted in this bedocument's effective date on the De		tory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of ficient for approval.	of votes cast for the amendment(s)
	roved by the shareholders through votin each voting group entitled to vote separ	
"The number of votes cast	for the amendment(s) was/were sufficien	nt for approval
by	(voting group)	``
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without sl	nareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without sharel	nolder action and shareholder
06/08/20 Dated	18	
Signature (S)		
(13) a o Selecto	rector, president or other officer – if dir 1, by an incorporator – if in the hands of	a receiver, trustee, or other court
	ed fiduciary by that fiduciary)	a receiver, a distect of other court
	JOSE J LIBREROS	
	(Typed or printed name of p	erson signing)
	PRESIDENT	
	(Title of person	signing)