P04000075697

(Re	questor's Name)	
(Add	dress)	-
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(Cit	y/State/Zip/Phoni	e #)
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LALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

	AMIDICIO A		NC.		
DOCUMENT NUMBER:	P-	04000075697			
The enclosed Articles of Amenda	nent and fee are su	bmitted for filing.			
Please return all correspondence	concerning this mat	tter to the following:			
	CA	RMEN J ROMERO			
• •	Name of Contact Person				
	A&A	MUL-T-SERVICES, IN	NC.		
 -		Firm/ Company			
	7:	9 LAS BRISAS WAY			
	Address				
KISSIMMEE, FL 34743					
-		City/ State and Zip C	ode		
	AAN	IULTSERVICES@GM	AIL.COM		
E-ma	il address: (to be us	ed for future annual rep	ort notification)		
	a this matter plan	ea nalle			
	ig this matter, preas		201-2036		
		at (Code & Daytime Telephone Number		
For further information concerning CARMEN J ROMERO Name of Contact inclosed is a check for the follow	Person	at (⁴⁰⁷ Area	Code & Daytime Telephone Number		
Name of Contact Inclosed is a check for the follow \$35 Filing Fee	Person	at (⁴⁰⁷ Area	Code & Daytime Telephone Number lepartment of State:		

Articles of Amendment Articles of Incorporation of

AMERICAN BEST GUTTERS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P04000075697

(Document Number of Corporation (if known)

L. If amending name, enter the new name of the co	rporation:	
		Thenew
ame must be distinguishable and contain the word "co Inc.," or Co.," or the designation "Corp," "Inc," chartered," "professional association," or the abbre	or "Co". A professional c	ncorporated" or the abbreviation "Corp.," orporation name must contain the word
3. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>	
		707
		``
 If amending the registered agent and/or register new registered agent and/or the new registered of 		enter the name of the
		7.2 (.)
Name of New Registered Agent		
	(Florida street address)	
	•	
New Registered Office Address:	(Cirv)	, Florida <i>(Zip Code)</i>
	, = -, ,	,
Yew Registered Agent's Signature, if changing Registered agent. Agent are appointment as registered agent.		the abligations of the position
петену ассери ше аррынатет их гедімизей адет.	сат затина ман ана иссере і	ne 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)

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

 $P-President;\ V-Vice\ President;\ T=Treasurer;\ S-Secretary;\ D-Director;\ TR-Trustee;\ C=Chairman\ or\ Clerk;\ CEO=Chief\ Executive\ Officer;\ CFO-Chief\ Financial\ Officer.\ If\ an\ officer/director\ holds\ more\ than\ one\ title,\ list\ the\ first\ letter\ of\ cach\ office\ held.$ 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 Doc	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	SEC	ESTEFRANIA LIBREROS	12863 SUNSTONE AVE. APT 202
Add			ORLANDO, FL 32832-6255
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change	 		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attact	nding or adding add additional shects, if i	necessary). (Bc spe				
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	<u> </u>					
						
			·			
If an a	mendment provides	for an exchange, re	classification, or c	ancellation of issue	d shares.	
provi	sions for implementi	ing the amendment i	if not contained in	the amendment its	elf:	
(f not applicable, indic	zate N/A)				
4						
			· · · · ·			
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	_					

		SEPTEMBER 22,	, 2020	
	ch amendment(s) ad	option:		, if other than the
date this docun	nent was signed.			
Differential district	# !! b. !	SEĮTEMBER 22	, 2020	
Effective date	ii applicable:	tno more than 90 de	ays after amendment file date)	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	age age and make my give week y	
		ock does not meet the applicable partment of State's records.	le statutory filing requirements, thi	is date will not be listed as the
Adoption of A	.mendment(s)	(CHECK ONE)		
	nent(s) was/were ado not required.	oted by the incorporators, or boar	rd of directors without shareholder	action and shareholder
	ment(s) was/were ado cholders was/were su		imber of votes east for the amendm	rent(s)
must be sep	parately provided for (rach voting group entitled to vote	th voting groups. The following state separately on the amendment(s):	itement
I RC	number of votes cast i	or the amendment(s) was/were s	utilicient for approval	
by		SHAREHOLDERS		
		(vating group)		
	Dated	09/22/2020		
	Signature	Jose J Libraros		
	selected		 if directors or officers have not be ands of a receiver, trustee, or other 	
		JOSE J LIBRE	EROS	
	-	(Typed or printed nam	ne of person signing)	
		REGISTER AGENT	7 PRESIDENT	

(Title of person signing)