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> HR 8/11/09

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION:	AMEZOLA HOUSING REMODELING INC			
DOCUMENT NU	MBER:		P0400013138	30	
The enclosed Artic	les of Amendment a	nd fee are submitte	ed for filing.		
Please return all co	rrespondence concer	ning this matter to	the following:		
	ANA L RAMOS Name of Contact Person				_
		rame of cont	act i cison		
	ANAS		SERVICES COR	Р	<u>.</u>
	Firm/ Company				
766 S. OSPREY AVE SUITE 8				_	
Address					
	SARASOTA, FL 34236				_
		City/ State and	l Zip Code		
	E-mail address: (OSHANA@CON to be used for future a	ACAST.NET	<u>n)</u>	
For further informa	ation concerning this	matter, please call	l:		
	NA L RAMOS	at (_	941	870-3400	
ANA L RAMOS Name of Contact Person			Area Code & Daytime	Telephone Numb	er
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☑ \$35 Filing Fee	☐ \$43.75 Filing Fee Certificate of Stat	tus Cer	3.75 Filing Fee & rtified Copy ditional copy is enclose	d) Certified	te of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amer Divis Clifto	et Address Indment Section Identification of Corporations In Building		
Tallahassee, FL 32314		200 I	Executive Center C	TI CIC	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

2009 AUG -7 PM 4: 05

AMEZOLA HOUSING REMODELING INC (Name of Corporation as currently filed with the Florida Dept. of Staff CRETARY OF STATE ALLAHASSEE. FLORIDA

(Document Number of Corporation (if known)

owing

	f the corporation:	•
		The n
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "Inc	"company," or "incorporated" or i ," or "Co". A professional corporati
3. 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 OFFIC	<u>CE BOX</u>)	
). If amending the registered agent and/or r	egistered office address i	Florida enter the name of the
new registered agent and/or the new regis		i Prorida, enter the name of the
Name of New Registered Agent:		
Name of New Registered Agent: New Registered Office Address:	(Florida street a	ddress)
		, Florida
	(Florida street a	,

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)

<u>Title</u>	Name , ,	Address	Type of Action
Secret	SERGIO ELICEA	2031 Harley Ave Sarasota, FL 34235	☑ Add □ Remove
			☐ Add ☐ Remove
			
	or adding additional Articles, enter clional sheets, if necessary). (Be specific		
	dment provides for an exchange, recla		
	for implementing the amendment if no applicable, indicate N/A)	ot contained in the amendment i	tself:
(ij noi u	ppricuote, maicute WA)		
	<u> </u>		
<u>.</u>			

The date of each amendmen	t(s) adoption: 08	//01/2009
. Effective date <u>if applicable:</u>	08/01/2009	(date of adoption is required)
Effective date in applicable.		0 days after amendment file date)
, N		
Adoption of Amendment(s)	(<u>CH</u>	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amend	dment(s) was/were sufficient for approval
by		39
·	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the	board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the	incorporators without shareholder action and shareholder
Dated	8/04/05	3
Signature _	Roberto	C Anerola
sel		ent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		ROBERTO AMEZOLA
•	(Тур	ped or printed name of person signing)
		PRESIDENT
	(Title of	f person signing)