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12 JUN 19 AM IO: 14
SERVE DEVI E STATE
ANASSEE PLORIDA

Amend

JUN 2 1 2012 T. CAULEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: A-1 HOME		CORP
DOCUMENT NUMBER: P0600008138	36	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
BERTHA ROSAI	RIO	•
	Name of Contact Person	1 ,
ROSARIO ACCO	DUNTING & IMM	IGRATION SERV.
	Firm/ Company	•
16953 NE 22 AV	'ENUE	
	Address	
NORTH MIAMI E	BEACH FL 33160)
	City/ State and Zip Cod	e
brosario@bellsouth.	net	
	ised for future annual report	notification)
	·	•
For further information concerning this matter, plea	se call:	
BERTHA ROSARIO	at (305	, 945-7686
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee & Certificate 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 Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle eassee, FL 32301

Articles of Amendment

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Articles of Incorporation

12 JUN 19 AM 10: 14

	of		n e e e e e e e e e	5
A-1 HOME REMODELING	G,CORP,	SE TAI	DATE THAT I SEE ALGALI	JA
(Name of Corporation as c	urrently filed with the Flo	rida Dept. of State)	L. ZABICO STATE OF THE STATE OF	
P06000081386				
(Document)	Number of Corporation (if	known)		
Pursuant to the provisions of section 607.10 ts Articles of Incorporation:	06, Florida Statutes, this F	lorida Profit Corpora	tion adopts the following	g amendment(s) t
A. If amending name, enter the new nam	e of the corporation:			
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation of the designation of the designation of the contain of	ion "Corp," "Inc," or "C on," or the abbreviation "P applicable: REET ADDRESS)	o". A professional c	ncorporated" or the ab orporation name must c	The new obreviation contain the
If amending the registered agent and/ new registered agent and/or the new to the ne	or registered office addre	ss in Florida, enter th	ne name of the	
	ROSARIO ACCTG.	& IMMG. SERVI	CES	
	16953 NE 22 AV	'ENLIE	- 1201 11 - 11	
-	(Florida stree			
New Registered Office Address:	NORTH MIAMI E	BEACH,	lorida 33160	
New Registered Office Address:	(City)	, r	(Zip Code)	
New Registered Agent's Signature, if cha Thereby accept the appointment as registered Sign		and	gations of the position.	

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	<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>	Address
1) Change Add	PT	EDDAR GAINZA	4400 SW 141ST AVENUE MIRAMAR FL 33027
X Remove			MIN VALUE OF THE STATE OF THE S
2) Change Add Remove	PT	LEONOR ALVAREZ	4400 SW 141ST AVENUE MIRAMAR, FL 33027
3) Change Add Remove			
4) Change Add Remove		_	
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Ar attach additional sheets, if necessary). ICLE VII" PLEASE DELETE EDDAR GAINZA AS PR	(Be specific)		S PRESIDENT	
INCLUSION OF THE ASE DELETE EDUAN GAINZA AS FR	ESIDENT AND ADD WA	IS. LEONOR ALVAEZ A	5 FRESIDEIN	
	······································			
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If an amendment provides for an exc	hange, reclassific	cation, or cancells	ation of issued sha	ares.
provisions for implementing the am	endment if not co	ntained in the an	nendment itself:	
(if not applicable, indicate N/A)				
			·	
				· ·

The date of each amendment(s) a	doption: 06/18/2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	,
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 06/18/	2012
Signature	Leonor Alvares
	lirector, president of other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court
	ted fiduciary by that fiduciary)
	LEONOR ALVAREZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)