## P08000013954

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Special Instructions to	Filing Officer:	
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DEC 16 2021

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Guardian Restoration	on Services, Inc.	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUM	1BER: P08000013954		·-
	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	Chris Burke		
		Name of Contact Person	1
		Firm/ Company	
	2063 Kansas Avenue NE		
		Address	
	St. Petersburg, FL 33703		
		City/ State and Zip Code	•
	caburke1@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	ion concerning this matter, pleas	se call:	
Chris Burke		at ( <sup>727</sup>	798-7710
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
■ \$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 is enclosed)
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

## Articles of Amendment Articles of Incorporation of

Guardian Restoration Services, Inc.				
	of Corporation as current	ly filed with the Flori	da Dept. of State)	
P08000013954	<u>-</u>			
	(Document Number o	of Corporation (if know	vn)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpo	ration adopts the followi	ng amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
Chris Burke Construction Services, Inc.				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cartered," "professional association,"	Corp," "Inc," or "Co"	A professional corpor	orated" or the abbreviat ration name must conta	ion "Corp.," in the word
B. Enter new principal office address,	if annlicable:	same		
(Principal office address MUST BE A S	TREET ADDRESS )			
				<del></del>
C - Enter new mailing address if anni-	icahle:			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		same		
			<del></del>	
			· · · · · · · · · · · · · · · · · · ·	<del></del>
D. If amending the registered agent ar	nd/or registered office add	ress in Fl <u>orida, enter</u>	the name of the	21
new registered agent and/or the new	w registered office address	<u>s:</u>	z	문
Name of New Registered Agent	same		· · ·	
	(Florida st	reet address)		 골 D
New Registered Office Address: (City)		, Florida = 1	လု	
		(City)	≥ <sup>†</sup> (Zip	Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent tered agent. I am familiar	t: with and accept the ol	bligations of the position.	
	Signature of New F	Registered Agent, if ch	anging	_

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:

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	<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
1) Change	PD	Christopher A. Burke	2063 Kansas Avenue NE
x Add			St. Petersburg, FL 33703
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Att	umending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)
N/A	
F. <u>lf :</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>p:</u>	rovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
N/A	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
•		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements epartment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the ame ufficient for approval.	ndment(s)
	proved by the shareholders through voting groups. The following reach voting group entitled to vote separately on the amendment	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
selecto	lirector, president or other officer – if directors or officers have need, by an incorporator – if in the hands of a receiver, trustee, or officed fiduciary by that fiduciary)  Christopher A. Burke	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	