

PO9000003478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

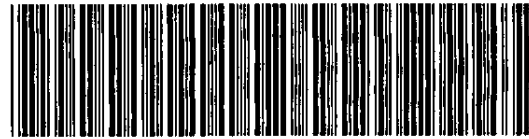
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2013 APR 15 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 22 2013

J. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: RELIABLE RESTORATIONS AND REMODELING INC

DOCUMENT NUMBER: P09000003478

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAREN MILLER

Name of Contact Person

RELIABLE RESTORATIONS AND REMODELING INC

Firm/ Company

674 SE RON RICO TERRACE

Address

PORT ST LUCIE FL 34983

City/ State and Zip Code

TAXSHOPPEFLA@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAREN MILLER

Name of Contact Person

at (772) 979-4730

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

RELIABLE RESTORATIONS AND REMODELING INC

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

P09000003478

(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) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

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**)

674 SE RON RICO TERRACE
PORT ST LUCIE FL 34983

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

674 SE RON RICO TERRACE
PORT ST LUCIE FL 34983

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:

Name of New Registered Agent DAREN MILLER
674 SE RON RICO TERRACE
(Florida street address)

New Registered Office Address: PORT ST LUCIE, Florida 34983
(City) (Zip Code)

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 changing

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TALLAHASSEE, FLORIDA

(Attach additional sheets, if necessary)

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 PT John Doe

X Remove V Mike Jones

<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>
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Title

Name

Address

1) <input type="checkbox"/> Change	<u>D</u>	<u>EDWARD MCKENNA</u>	<u>5336 CONLEY DRIVE</u>
<input type="checkbox"/> Add			<u>PORT ST LUCIE</u>
<input checked="" type="checkbox"/> Remove			<u>FLORIDA 34986</u>

2) ____ Change _____

____ Add _____

____ Remove _____

3) _____ Change _____
 _____ Add _____
 _____ Remove _____

4) _____ Change _____
_____ Add _____
_____ Remove _____

5) _____ Change _____
 _____ Add _____
 _____ Remove _____

6) _____ Change _____
 _____ Add _____
 _____ Remove _____

[illegible][illegible]

The date of each amendment(s) adoption: APRIL 9 2013

Effective date if applicable: APRIL 9 2013
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

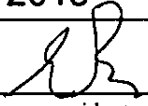
- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each 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)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated APRIL 9 2013

Signature 
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

DAREN MILLER

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)