## P090000 14922

(Re	questor's Name)		
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(Cit	y/State/Zip/Phone	e #)	
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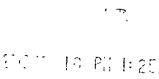
## COVER LETTER -

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ATELIER AVANG	CE Inc.			
DOCUMENT NUM	P0900014922				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	itter to the following:			
	MASSIEL SUHR				
	Name of Contact Person				
	Firm/ Company				
	9661 SW 147 STREET				
		Address			
	MIAMI, FL 33176				
	City/ State and Zip Code				
	SUHRMASSIEL@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
MASSIEL SUHR		, 786 at (	) 663-4684		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:		
S35 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		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



ATELIER AVANCE Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P09000014922 (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: SUHR DESIGN BUILD Inc. 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." 9661 SW 147 STREET B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) MIAMI FL 33176 C. Enter new mailing address, if applicable: 9661 SW 147 STREET (Mailing address MAY BE A POST OFFICE BOX) MIAMI FL 33176 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 (Florida street address) \_\_\_\_, Florida\_\_ New Registered Office Address: (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

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 Doc	
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			
Remove			· · · · · · · · · · · · · · · · · · ·
2) Change		_	
Add			
Renюve 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

(Atta	mending or adding a sch additional sheets,	if necessary).	(Be specific)			
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. <u>If ar</u>	n amendment provide ovisions for implement (if not applicable, ind	nting the amend	nge, reclassifica Iment if not co	ntion, or cancella ntained in the am	tion of issued sha endment itself:	res.
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The date of each amendment(	s) adoption:	, if other than the
date this document was signed.	•	
Effective date if applicable:		
	(no more than 90 days after amendment file a	late)
	ais block does not meet the applicable statutory filing requirer to Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the re sufficient for approval.	amendment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amend	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
03/29/2 Dated	020	
Signature #	lani Blam ?	
	a director, president or other officer – if directors or officers have ected, by an incorporator – if in the hands of a receiver, trustee,	
	pointed fiduciary by that fiduciary)	or other court
	MASSIEL SUHR	
	(Typed or printed name of person signing)	
	SECRETARY	
	(Title of person signing)	