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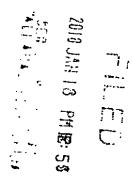
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON: JCD	REMODELIUC	1 COMPANY			
DOCUMENT NUMBER: <u>P0900015040</u>						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
	JCD	Name of Contact Person REMODELIN Firm/ Company Address				
MIAMI, FL, 30185 City/ State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Jan C. Name of Co	Dorado ntact Person	at (786 Area Cod	374-6908 e & 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		Street A	Address			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

Articles of Amendment

to

Articles of Incorporation

of

JCD REMO	DELING	COMPA	N of State)		
(Name of Corpor	ation as currently i	neu with the Florida De	pr. or stare)		
(1)ux	cument Number of C	orporation (if known)	· . • ·		
Pursuant to the provisions of section 607.1006, Flor	rida Statutos this F L	orida Profit Corneration	adopte the follo	vuina amer	ndmentte) ta
its Articles of Incorporation:	rida Statutes, tins Fu	maa rroja corporation	adopts the form	Julig affici	iditeti(s) to
A. If amending name, enter the new name of the	corporation:				
JUD PRO DAIL	MING	$C \sim$		Тће	na.
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp ""Inc," or "Co	o". A professional corpo		ne abbrevio	ation
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		NIA			-
C. Enter new mailing address, if applicable:				2019	
(Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	N 14			
			,	® <u> </u>	i
			•	· P	
				, Rij	<u> </u>
D. If amending the registered agent and/or regi- new registered agent and/or the new register		s in Florida, enter the na	ame of the	: 60 : 01	
Name of New Registered Agent	NID				
	(Florida street	address)			
New Registered Office Address:	NIA		, Florida		
	(C	ity)		(Zip Code)	_
New Registered Agent's Signature, if changing F	Registered Agent:				
I hereby accept the appointment as registered agen		h and accept the obligation	ons of the posit	ion.	
	111N -				
	NIA				
2	ignature of New Reg	istered Agent, if changing	?		

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: X Change	<u>[7]</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Ju	<u>ones</u>	
_X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	T		Juan F. Dorado	15477 SW 18LN
Add Remove				MIAMI, FL.
2) Change Add		_		
Remove 3) Change Add				
4) Change Add		_		
Remove Change Add		_		
Remove 6) Change Add		_		
Remove				

ttach additional sheets, if necessary). (1				
		•		
		·· -		
			· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an exchange ovisions for implementing the amendr	<u>e, reclassification.</u> pent if not contain:	<u>or cancellation (</u> ed in the amenda	<u>of issued shares,</u> nent itself:	i
(if not applicable, indicate N/A)				
NIA				
1014				·-
				
		<u> </u>		

•	811A	
The date of each-amendment(s) adoption: late this document was signed.	N 147	, if other than th
Effective date <u>if applicable</u> :	(no more than 90 days after amenda	
	(no more than 90 days after amendi	nent file date)
Note: If the date inserted in this block does no document's effective date on the Department of		g requirements, this date will not be listed as th
Adoption of Amendment(s) (CH	ECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes ca approval.	ist for the amendment(s)
The amendment(s) was/were approved by the must be separately provided for each voting		
"The number of votes cast for the amer	ndment(s) was/were sufficient for appr	roval
by		, n
(vol	ing group)	
The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder	r action and shareholder
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder acti	ion and shareholder
Dated January.	15, 2018	
Signature		
(By a director, pres	ident or other officer – if directors or	
selected, by an inco appointed fiduciary	orporator – if in the hands of a receive by that fiduciary)	r, trustee, or other court
	Juan C. Doro	240
	(Typed or printed name of person sign	ing)
	PRESIDENT.	

(Title of person signing)