PC9000055185

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ALL SEASONS B	UILDING MAINTENANC	CE, INC.			
DOCUMENT NUM	P09000055185					
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.				
Please return all corre	spondence concerning this mat	tter to the following:				
	Aleyda Flores					
		Name of Contact Person				
	ALL SEASONS BUILDING MAINTENANCE, INC.					
	Firm/ Company					
	304 NW 43RD PL					
	Address					
	POMPANO BCH, FL 33064					
		City/ State and Zip Code	:			
	ale_flores001@yahoo.com					
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
ALEYDA FLORES		at (638-2738			
Name of Contact Person		Area Coo	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

*

Articles of Amendment Articles of Incorporation of

Articles of Amendment to Articles of Incorporation of L SEASONS BUILDING MAINTENANCE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known)	2
(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known)	3. T.
(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known)	्र स्
(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known)	<i>6</i> 3
(Document Number of Corporation (if known)	(4)
	_
want to the provisions of eastion 607 1006. Floride Statutes this Ethnide Broff Commendants the following amendment	£1.
tuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendmenticles of Incorporation:	ent(s) to
If amending name, enter the new name of the corporation:	
L SEASONS E&A PAVERS INC	
e must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word artered," "professional association," or the abbreviation "P.A."	1
Enter new principal office address, if applicable: ncipal office address MUST BE A STREET ADDRESS)	
,	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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)	
New Registered Office Address:, Florida	
new registered agent and/or the new registered office address:	

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 Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	D		EDUARD LAZARO	304 NW 43RD PLACE
X Add		_		POMPANO BEACH, FL 33064
Remove				
2)Change		_		
Add				
Remove 3) Change		<u> </u>		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).		· 		
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			. <u></u>	
 				
If an amendment provides for an exch	ange, reclassification	on, or cancellation	of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not conta	ined in the amendi	ment itself:	
(g mai approache) maiotae (m.)				
				

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	05/13/2020	
The date of each amendment		, if other than the
late this document was signed		
Effective date <u>if applicable</u> :	05/13/2020	
<u></u>	(no more than 90 days after amendment file d	ate)
	this block does not meet the applicable statutory filing requirem he Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wei action was not required.	re adopted by the incorporators, or board of directors without share	reholder action and shareholder
The amendment(s) was/wes	re adopted by the shareholders. The number of votes cast for the ere sufficient for approval.	amendment(s)
	re approved by the shareholders through voting groups. The follow d for each voting group entitled to vote separately on the amenda	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	,,	
· · · · · · · · · · · · · · · · · · ·	(voting group)	
05/13 Dated	/2020	
Signature X	Aleus (P)	
	y a director, president or other officer = if directors or officers ha	
	elected, by an incorporator – if in the hands of a receiver, trustee, oppointed fiduciary by that fiduciary)	or other court
		
	ALEYDA FLORES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	