P1000034215

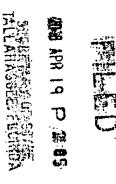
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: ALUMA-PRO EN	TERPRISES, INC.	
DOCUMENT NUMB	P10000034215		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
	JAIME AURELIO TELLO		
-		Name of Contact Persor	1
-		Firm/ Company	
	13200 NW 43RD AVENUE		
-		Address	
1	OPA LOCKA, FLORIDA 33	054	
	•	City/ State and Zip Code	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, please	se call:	
JAIME AURELIO TE	LLO	at (400-0560
Name o	f Contact Person		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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

	Articles of 10	_ -
ALUMA-PRO ENTERPRISES, INC.	•	
(Name	of Corporation as curren	tly filed with the Florida Dept. of State)
P10000034215		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
APEX RENOVATIONS & CONSTRUC	CTION INC.	The new
	nation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		13200 NW 43 AVENUE, SUITE C
		OPA-LOCKA, FLORIDA 33054
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		13200 NW 43 AVENUE, SUITE C
		OPA-LOCKA, FLORIDA 33054
•		
D. If amending the registered agent an new registered agent and/or the ne		
Name of New Registered Agent	BARBARA SANJURJO,	, PA
	2630 SW 28 STREET, S	UITE 61
	(Florida s	treet address)
New Registered Office Address:	COCONUT GROVE, FL	ORIDA , Florida 33133
		(City) Acade (Code)
New Registered Agent's Signature, if o	hanging Registered Age	
		with and accept the obligations of that position.
and the same of th		
	Signature of New	Registered Agent, if changing
	\1	<i>∫</i> •• ·

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>PT</u>	John Doo	2		
X Remove	<u>v</u>	Mike Jor	<u>nes</u>		
X Add	<u>sv</u>	Sally Sm	<u>ith</u>		
Type of Action (Check One)	Title		Name		Address
1) Change		_		-	
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change		<u> </u>		•	
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_		,	
Add					
Remove					
6) Change					
Add		-			
Remove					

ttach additiona	dding additional Arti l sheets, if necessary).	(Be specific)				
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an amendmen	t provides for an exch	ange, reclassific	ation, or cancel	lation of issued	shares,	
rovisions for in	mplementing the amer cable, indicate N/A)	ndment if not co	ntained in the a	mendment itsel	<u>f:</u>	
(3pp	more, maicuse 1,					
			<u> </u>			
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	<u></u>					

The date of each amendment(s)	doption:	, if other than the
date this document was signed.		
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, this datepartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	3)
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	,"	
	(voting group)	
☐ The amendment(s) was/were accation was not required.	lopted by the board of directors without shareholder action and shareholde	भ
☐ The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder	
APRIL 18 Dated Signature	aine M	
(By a select	difector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	t
	JAIME AURELIO TELLO	
	(Typed or printed name of person signing)	
	PRESIDENT/DIRECTOR/SECRETARY	
	(Title of person signing)	