## PIIODODIID83

(Re	questor's Name)	·
(Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷ #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	eument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800237813988

08/01/12--01013--003 \*\*35.00

DAVISION DEPOCUSAÇÃO A SUIC - 1 PM 2: 53

Amend 108/12

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: RESTORAT ER: P1100001108		S GROUP CORP
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	JO	RGE L RAMIRE	ΞZ
_		Name of Contact Person	
	RESTORATIO	N SOLUTIONS	
_		Firm/ Company	
_	2310 V	WWATER AVE	STE E
		Address	
	T.	AMPA, FL 3360	)4
_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	City/ State and Zip Code	3
	RESTOR	ATIONSOLUTIO	N@GMAIL.COM
		sed for future annual report	_
For further information	concerning this matter, pleas	se call:	
JORGE RAM	IREZ	at (813	352-8809
Name of	f Contact Person	Area Co	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)
	ing Address	Street	Address
	ndment Section		ment Section
	ion of Corporations		n of Corporations
	Box 6327 hassee, FL 32314		Building executive Center Circle
Lana	Hassee, FL 32314		acces El 22201

## **Articles of Amendment Articles of Incorporation**

## RESTORATION SOLUTIONS GROUP CORP

(Name of Corporation as currently filed with the Florida Dept. of State) P0111000011083

A. If amending name, enter the new na	me of the corporation:			
N/A				The new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," o	or "Co". A professio		
B. Enter new principal office address, (Principal office address MUST BE A S		N/A		<u> </u>
				digital consequences.
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A		S P
D. If amending the registered agent an			ter the name of the	PM 2: 53
new registered agent and/or the nev	CARLOS JUL			မ် 🤻
Name of New Registered Agent		<del></del>	<del> </del>	
	102 S CHURO			
		a street address)	22600	
New Registered Office Address:	TAMPA ,FL		, Florida 33609	
	(C	lity)	(Zip Code)	
	1			

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 <math>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 Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	S	Carlos Julio Quiroz	102 S Church Ave
X Add			Tampa, FI 33609
Remove			
2) Change			
Add			
Remove			#17-min Hill 1-2
3 ) Change			
Add			e tradition .
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			- · · · · · · · · · · · · · · · · · · ·
Add			
Remove			

	nending or adding additional Articles, enter change(s) here:  the additional sheets, if necessary). (Be specific)
	the distribution sheets, if necessary, the specific
I/A	
	•
	· · · · · · · · · · · · · · · · · · ·
If an	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself:
pro	(if not applicable, indicate N/A)
I/A	
•// \	
•	

The date of each amendmen	t(s) adoption: U7/3U/2U12
Effective date <u>if applicable</u> :	07/30/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	es cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
D 07	/30/2012
Signature _ (	
ě.	/
	JORGE RAMIREZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of newcon signing)