12/6/23, 2:54 PM



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230004171573)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

т	^	

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : FASTKIT CORP

Account Number : I20100000009

Phone : (305)599-0839 Fax Number : (305)592-9591

**Enter	the	email	address	for	this	busine	255	entity	to	be	used	for	future
an	nual	repor	t mailin	gs.	Enter	only	one	email	add	res	s ple	ase.	* *

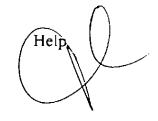
Email	Address:	 	 	 	_	

COR AMND/RESTATE/CORRECT OR O/D RESIGN SANTOS CONTRACTOR TRIM INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu



Articles of Amendment to Articles of Incorporation of

		OI .		
	SANTOS CONTR	ACTOR TRIM INC.		
(Name	of Corporation as curre	ntly filed with the Flor	ida Dept. of State)	
	P11000	0086423		
	(Document Numbe	r of Corporation (if kno	wn)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corpo	pration adopts the following amenda	nent(s)
A. If amending name, enter the new n	ame of the corporation:			
N/A		`	The ne	110
name must be distinguishable and contain "Inc" or Co.," or the designation "C "chartered" "professional association,"	Corp, " "Inc," or "Co".	A professional corpo	porated" or the abbreviation "Corp.	. "
B. Enter new principal office address,	if applicable;	N/A	30	79
(Principal office address MUST BE A S	TREET ADDRESS)	N/A	75. 7	10 THE REAL PROPERTY.
		N/A	5 6	न्द्रम
Enter new mailing address, if applicable; (Malling address MAY BE A POST OFFICE BOX)		N/A	St. 14 9.	Ö
	<u></u>	N/A	12 V3	
		N/A		
D. If amending the registered agent an new registered agent and/or the ne	w registered office addre		the name of the	
Nume of New Registered Agent	N/A			
	N/A			
	(Florida .	sireel address)		
New Registered Office Address:	N/A		. Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, If c hereby accept the appointment as regist	hanging Registered Ages ered agent – I am famililas	nt: · with and accept the ob	eligations of the position.	
	Signature of New	Registered Agent, If chi	anging	
Check if applicable	(AR A1B2 ***	\		
☐ The amendment(s) is/are being filed po	arsuant 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)

Pleuse 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address 2023
1) Change	VP	ILCI DOS SANTOS	353 CAMDENO 2 CA
X Add		· · · · · · · · · · · · · · · · · · ·	WEST PALM BEACH, FL 33417
Remove			
2) Change	D	JONATHAN DOS SANTOS	353 CAMDEN O
X Add			WEST PALM BEACH, FL 3349
Remove 3) Change			
Add			
Remove			
4) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	
NONE	
	·
	. 20
	س نب
	6
	(A) = (
	<u> </u>
	五元 57
	1.
. If an amendment provides for an exchange, reclassification, or cancellation of issu	and all comme
provisions for implementing the amendment if not contained in the amendment if	seu snares, tself:
(if not applicable, indicate N/A)	
JUCIA W. DOS SANTOS 50 SHARES	
LCI DOS SANTOS 40 SHARES	
ONATHAN DOS SANTOS 10 SHARES	
	·

	DECEMBER 06, 2023	
The date of each amendment((s) adoption:	_ if other than the
date this document was signed.		_
	DECEMBER 06, 2023	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	nis block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	iot be listed as the
Adoption of Amendment(5)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and sh	nareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	<u> </u>
"The number of votes o	ast for the amendment(s) was/were sufficient for approval))
by	(voting group)	J K.
	(voting group)	1 ., *******
		رح استعد ا
DECEM	1BHR 06, 2023	
Dated	141.1	
<u></u>	The state of the s	ي ك
Signature	Sem Lud	Ś
Signature (Po	director, president or other officer - if directors or officers have not been	ယ
(D) (cted, by an incorporator – if in the hands of a receiver, trustee, or other court	
anno	pinted fiduciary by that fiduciary)	
4770	mice riddelary by that riddelary)	
	ILCI DOS SANTOS	
	(Typed or printed name of person signing)	
	VICE-PRESIDENT	
	(Title of person signing)	