## P12000025824

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DIVISION OF CORE OF STATE OF STATE OF CORE OF CORE OF CORE OF CORE OF CALLS TO



## COVER LETTER

DIVISION OF CORPORATION

**TO:** Amendment Section Division of Corporations

IS: IIM OS NUL EES

NAME OF CORPOR	ATION: KMP HOME IMP	ROVEMENT I	≰C.	
DOCUMENT NUMB	P1200002582J			
The enclosed Articles of	of Amendment and fee are su	bmitted for tilin	g.	
Please return all corres	pondence concerning this mat	tter to the follow	ving:	
	GUII	LLERMO MON	ITES DE O	CA
-		Name of Co	ntact Persor	1
	КМЕ	HOME IMPR	OVEMENT	TINC
		Firm/ C	ompany	
	-	2123 SANDRA	LA DRIVE	:
		Add	ress	
		SARASOTA	, FL 34231	
•		City/ State a	nd Zip Cod	e
gallol	80@hotmail.com			
	E-mail address: (to be us	sed for future an	nual report	notification)
For further information	concerning this matter, pleas	se call;		
GUILLERMO MONT	ES DE OCA	at (_	941	893-8052
Name o	of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the F	lorida Depi	artment of State:
■ \$35 Filling Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fili Certified C (Additional enclosed)	opy	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building		
Talla	ihassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation $\mathbf{of}$

PILED DECKFIARY OF

KMP HOME IMPROVEMENT INC

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(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)		
	P120000	25824		
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new na	ime of the corporation:			
		The new		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	vation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."		
B. Enter new principal office address,	if annlicable:	2123 SANDRA LA DRIVE		
(Principal office address MUST BE A S		SARASOTA, FL 34231		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2123 SANDRA LA DRIVE		
		SARASOTA, FL 34231		
D. If amending the registered agent an	d/or registered office ad	dress in Florida, enter the name of the		
new registered agent and/or the new				
Name of New Registered Agent	GUILLERMO MONTES	S DE OCA		
	2123 SANDRA LA DRI	VE, SARASOTA FL 34231		
	(Florida s	treet address)		
New Registered Office Address:	2123 SANDRA LA DRIVE, SARASOTA , Florida 34231			
ive a regimered vigite indicess.		(City) (Zip Code)		
		•		
New Registered Agent's Signature, if c I hereby accept the appointment as regist		u:  with and accept the obligations of the position.		
	Signature of NeW	Reversed 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>PT</u>	John Doe				
X Remove	<u>V</u>	Mike Jones				
X Add	<u>SV</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change	VP	PABLO O. MORALES	1942 HARLLEY AVE			
Add			SARASOTA, FL 34235			
X Remove						
2) Change						
Add						
Remove						
3 ) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

Ex If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
PABLO O, MORALES LEFT THE COMPANY ABOUT 2 YEARS AGO.
THAT IS I WANT TO REMOVE HIS NAME FROM THE ARTICLES.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) add	ption:		, if	other than the
date this document was signed.				
Effective date <u>if applicable</u> :			<u> </u>	
	(no more than 90 d	ays after amendment f	tle date)	
<b>Note:</b> If the date inserted in this blo document's effective date on the Dep		e statutory tiling requ	irements, this date will not b	be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )			
☐ The amendment(s) was/were adop by the shareholders was/were suff		imber of votes cast for	the amendment(s)	
☐ The amendment(s) was/were appr must be separately provided for e				
"The number of votes cast for	or the amendment(s) was/were so	ufficient for approval		
by		·	•	
	(voting group)			
<ul><li>□ The amendment(s) was/were adopaction was not required.</li><li>□ The amendment(s) was/were adop</li></ul>	·			
action was not required.		1		
Dated	-31-18			
Signature				
	ector, president or other officer by an incorporator – if in the ha			
appointe	d fiduciary by that fiduciary)			
-	Gru   Crr	ne of person signing)	ites de Oc	<u>ra</u> U.
_	Presi	dent	owner	· <del></del>
	(Title of p	person signing)		