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T. NEWIEUX

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BAJA REMODELING & SERVICES, INC.				
DOCUMENT NUMBER: P12000062277				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
	ELIWAR DECAR	VALHO		
		Name of Contact Person	l	
	E.R.C. CONSUL	TING, INC.		
		Firm/ Company		
	552 S DIXIE HWY E			
		Address		
	POMPANO BEAC	CH, FLORIDA 33	3060	
		City/ State and Zip Code	2	
EL	WAR@BELLSOL	JTH.NET		
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
		at (de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department 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		Street	Address	
Ame	endment Section	Amendment Section		
	ision of Corporations	Division of Corporations		
	. Box 6327 ahassee. FL 32314	Clifton Building 2661 Executive Center Circle		
1 211	anassee, FL 32314	2001 E	xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

	BAJA	REMODEL	.ING &	SERVICES	, INC.
--	------	---------	--------	-----------------	--------

(Name of Corporation as currently filed with the	Florida Dept. of State)	-
P12000062277		
(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must of	obreviation contain the
B. Enter new principal office address, if applicable:	2751 NE 10 TER	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	POMPANO BEACH, FL 33064	•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2751 NE 10 TER	
	POMPANO BEACH, FL 33064	
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the	
new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida s	treet address)	ة مس
New Registered Office Address: (City	, Florida	13 NO
		FILESCON CF C
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	<u>t:</u> with and accept the obligations of the position.	.1:11.44 .1:19.80.22 .19.18.30 A
Signature of New Registered	Agent if changing	– 55 m

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			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
o 🗆 🛪			
6) Change			
Add			
Remove			

	ticles, enter change(s) here: (Be specific)
,	
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it an amendment provides for an exci	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:
provisions for implementing the ame	
(if not applicable, indicate N/A)	,
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 11/19/2013	, if other than the
date this document was signed.	 -
Effective date if applicable: 11/19/2013	
(no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_11/19/2013	
Signature Company of the state	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
MARCIO L FAOT	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	<u> </u>