## P13000012470

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## **COVER LETTER**

TO: Amendment Section

Division of Corporat	ions		
NAME OF CORPORAT	( ( ( ) ( ) ( ) ( )	Quality Re	novations Cor
	Amendment and fee are su	bmitted for filing.	
·	ndence concerning this mat	-	
	Soyce	Name of Contact Person	rento
	6 Bro	Firm/ Company Address	
	FORT	STewayT City/ State and Zip Code	GA 31315
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	oncerning this matter, pleas	se call:	
		at (	de & Daytime Telephone Number
Name of C	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Divisio	g Address ment Section on of Corporations ox 6327	Amend Division	Address Iment Section on of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation of

US QUALITY RENOVATIONS C	ORP.
(Name of Corporation as currently filted with the Florida Dept. of State)  P1300012470  (Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ring amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name musurd "chartered," "professional association," or the abbreviation "P.A."	The new abbreviation st contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent	14 SEP 24 F
· · · · · · · · · · · · · · · · · · ·	<b>8</b> 122
(Florida street address)  New Registered Office Address:, Florida,	<u> </u>
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	n.
Signature of New Registered 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.

Mike Jones, V as Remove Example:	, and Sali	ly Smith,	SV as an Add.		
X Change	PT	John D	<u>oc</u>		
X Remove	<u>v</u>	Mike Jo	<u>ones</u>		
X Add	<u>\$V</u>	Sally S	<u>mith</u>		
Type of Action (Check One)	Title		Name	Address	
1) Change	5		MARCIO C. PEIXOTO	255 White Dog	wood hi
Add				Ocoee, FC	
Remove			MARCIO C. PEIXOTO	3476/	
2) Change		<del></del>	<u> </u>	<u></u>	
Add					
Remove					
3) Change		_			•
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add				····	
Remove					
6) Change			44,444,444,444	<u> </u>	
Add					
Remove				······································	

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
<del></del>	
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	W
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If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an and an
provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and in the amendment itself;

The date of each amendment(s) adoption:	08/20/2019	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the amendment(s) or approval.	
	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):	
	mendment(s) was/were sufficient for approval	
by	(voting group)	
<i></i>	(voting group)	
The amendment(s) was/were adopted by t action was not required.	he board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by t action was not required.	he incorporators without shareholder action and shareholder	
Dated08/2	0/2014	
Signature	eendrollenhe	
(By a director, pr	resident or other officer - if directors or officers have not been	<del></del>
• •	ncorporator – if in the hands of a receiver, trustee, or other court ary by that fiduciary)	
	LEANDRO CUNHA	
	(Typed or printed name of person signing)	
	PRESIDENT	<del></del>
	(Title of person signing)	