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(Reau	estor's Name)	
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(City/S	State/Zip/Phone	: #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BARREDA AC SE	ERVICE INC		_
	BER: P13000055480			_
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	MARIO BARREDA			
		Name of Contact Person	1	
		Firm/ Company		
	921 E 33RD ST			
		Address		
	HIALEAH FL 33013	G: 10: 10: 0.1		
		City/ State and Zip Code	e	
	mario1549antonio@gmail.co			_
	E-mail address: (to be us	ed for future annual report	notification)	2022 %];
For further information	on concerning this matter, pleas	se call:		2022 NOV 15 AM 10: 06
MARIO BARREDA		at (<u>786</u>) 447-6620 de & Daytime Telephone No	
Name	of Contact Person	Area Co	de & Daytime Telephone No	umber 🖰 🕱
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:): 06 F)
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 81	10

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

RAR	REDA	AC SERV	TOF INC.

BARREDA AC SERVICE INC			
(Name of Corporation as currently filed with the Florida Dept. of St	:ate)		
P13000055480			
(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts t its Articles of Incorporation:	he following	g amen	dment(s) to
A. If amending name, enter the new name of the corporation:			
		The	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name n "chartered," "professional association," or the abbreviation "P.A."	abbreviatio iust contair	- m "Cor	p.,
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)			
		1022	
	三語	- N	 - -
		<u>-<</u>	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the state	he 🐣	رن ت	सार्वास् र
new registered agent and/or the new registered office address:	10 CT	AH IO:	्राच्यक्ता <u>व</u>
Name of New Registered Agent	1 :: 1	Ö	'lames'
	구유	90	
(Florida street address)		•	
New Registered Office Address: Flori	da		
(City)	(Zip C	lode)	
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	e position.		
	•		
Signature of New Registered Agent, if changing			
Check if applicable			
☐ The amendment(s) is/are being filed pursuant 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)

Example:

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.

X Change	PT	<u>John Do</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	VP		JUAN MEJIA	921 E 33RD ST
Add				HIALEAH ,FL 33013
X Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4)Change		_		
Add				
Remove				
5) Change		<u>-</u>		
Add				
Remove				
6) Change		_		
Add				
Remove				

. <u>If amending or adding additional a</u> (Attach <i>additional sheets, if necessar</i>	v). (Be specific)	gets) nere:		
<u> </u>				
				· · · · · · · · · · · · · · · · · · ·
	_			
	···			
				·
If an amendment provides for an e	exchange, reclassific	cation, or cancella	tion of issued share	s,
provisions for implementing the a	imendment if not co	ontained in the an	nendment itself:	
(if not applicable, indicate N/A)			
<u>, , , , , , , , , , , , , , , , , , , </u>				
	· · ·			
				

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirement Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareho	older action and shareholder
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the ame sufficient for approval.	endment(s)
	pproved by the shareholders through voting groups. The followin or each voting group entitled to vote separately on the amendmen	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
10/25/20: Dated		
selec	director, president or other officer – if directors or officers have reted, by an incorporator – if in the hands of a receiver, trustee, or on inted functions by that fiduciary)	
	MARIO BARREDA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	