# P14000027167

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Reliable Condo Remodeling Inc. DOCUMENT NUMBER: P14000027167 The enclosed Articles of Amendment and fcc are submitted for filing. Please return all correspondence concerning this matter to the following: John Fenwick Name of Contact Person Reliable Condo Remodeling Inc. Firm/ Company 2201-E Grant Ave Address Panama City, Fla 32405 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:  $\underset{\text{Area Code & Daytime Telephone Number}}{\text{850}} 914\text{-}0465$ John Fenwick Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

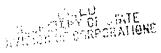
**Mailing Address** 

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### **Articles of Amendment** Articles of Incorporation of



14 AUG 25 PH 2: 22

## Reliable Condo Remodeling Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

#### D1/1000027167

nent(s) to

(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	ida Statutes, this <i>Florida Pro</i>	rofit Corporation adopts the following ame	ndme
A. If amending name, enter the new name of the	corporation:		
		The	пен
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or to	rp," "Inc," or "Co". A pr	pany," or "incorporated" or the abbrev	iation
B. Enter new principal office address, if applical	bl <u>e:</u>		
(Principal office address <u>MUST BE A STREET A</u>			
	<b></b>		
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE I</u>	<u> </u>		
<ul> <li>If amending the registered agent and/or registered agent and/or the new registered.</li> </ul>		rida, enter the name of the	
Name of New Registered Agent			
	(Florida street address)	ı	
New Registered Office Address:	(6)	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing R	egistered Agent:		
I hereby accept the appointment as registered agent		ecept the obligations of the position.	

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)

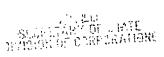
Please note the officer/director title by the first letter of the office title:

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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	Sec		Stanley Trey Worsham	2695 Island View Drive
<b>✓</b> Add				Panama City, Fla 32405
Remove				•
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change	-	_		
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5) Change				
Add				
Remove				<del></del>
6) Change				
Add				
Remove				

	sheets, if necessary).	(Be specific)	ge(s) here:		
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		shawaa waalaasiffa	ation, or cancel	lation of issued sh	ares,
provisions for in	provides for an exc nplementing the am cable, indicate N/A)	endment if not co	ntained in the a	mendment itself:	
<u>provisions for in</u>	nplementing the am	endment if not co	ntained in the a	mendment itself:	
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The date of each amendment(s) adoptio	n:	, 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 sufficien	by the shareholders. The number of votes cast for the amendment(s) at for approval.		
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):		
"The number of votes cast for the	e amendment(s) was/were sufficient for approval		
by	-1		
	(voting group)		
The amendment(s) was/were adopted by action was not required.	by the board of directors without shareholder action and shareholder		
The amendment(s) was/were adopted by action was not required.	by the incorporators without shareholder action and shareholder		
Dated 20 August 20	014		
Signaturo	Law Jam ()		
(By a director selected, by a	r, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court luciary by that fiduciary)		
Johr	n Fenwick		
	(Typed or printed name of person signing)	_	
Pres	8		
	(Title of person signing)		

. . . .