

P14 000059171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

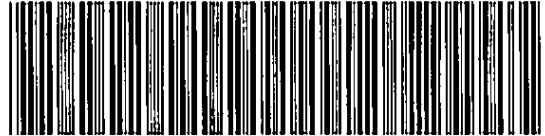
(Document Number)

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08/11/20--01017--014 **35.00

R White
10/12/20

1081.00

R. WHITE
AUG 10 2020

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Superior Home Energy Improvement Services Inc

DOCUMENT NUMBER: P14000059171

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Lloyd
Name of Contact Person
Superior Home Energy Improvement Services
Firm/ Company
501 N Orlando Ave ste 313-255
Address
Winter Park, FL 32789
City/ State and Zip Code
Superiorhomeimprovements5@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Lloyd at (407) 557-2011
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 JUN 11 PM 2:55

June 30, 2020

JOHN LLOYD
501 N ORLANDO AVE STE 313-255
WINTER PARK, FL 32789

SUBJECT: SUPERIOR HOME ENERGY IMPROVEMENT SERVICES INC
Ref. Number: P14000059171

We have received your document for SUPERIOR HOME ENERGY IMPROVEMENT SERVICES INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 620A00012854



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 13, 2020

JOHN LLOYD
501 N ORLANDO AVE STE 313-255
WINTER PARK, FL 32789

SUBJECT: SUPERIOR HOME ENERGY IMPROVEMENT SERVICES INC
Ref. Number: P14000059171

We have received your document for SUPERIOR HOME ENERGY IMPROVEMENT SERVICES INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 220A00015392

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>Change</u>	<u>P</u>	<u>John Lloyd</u>	<u>501 N Orlando Ave Ste 313-255</u>
<u>X</u> Add			<u>Winter Park, FL 32789</u>
<u>Remove</u>			
2) <u>Change</u>	<u>S</u>	<u>Tarya Tribble</u>	<u>6928 US Hwy 301 South</u>
<u>X</u> Add			<u>Riverview, FL 33578</u>
<u>Remove</u>			
3) <u>Change</u>	<u>O</u>	<u>Kerny Pierre-Louis</u>	<u>501 N. Orlando Ave</u>
<u>Add</u>			<u>Suite 313-255</u>
<u>X</u> Remove			<u>Winter Park, FL 32789</u>
4) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
5) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
6) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			

(Attach additional sheets, if necessary). (Be specific)

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 block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

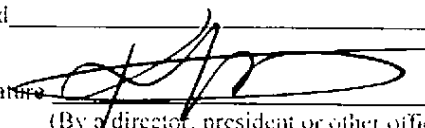
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ 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 amendments:*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____
(voting group)

6/5/2020
Dated _____

Signature  _____
(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)

Kerry Pierre-Louis

(Typed or printed name of person signing)

Officer

(Title of person signing)