## P14000059171

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Superior Home En	ergy Improvement Services	s Inc
DOCUMENT NUM	PL4000050171		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	John Lloyd		
		Name of Contact Person	1
	Superior Home Energy Improvement Services		
		Firm/ Company	
	501 N Orlando Ave ste 313-2	255	
		Address	
	Winter Park, FL 32789		
		City/ State and Zip Cod	e e
	Superiorhomeimprovements:	5@gmail.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, plea		557-2011
-	of Contact Person	at (at Co	) 557-2011 de & Daytime Telephone Number
	or the following amount made		
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amenc Divisic The C	Address Iment Section on of Corporations entre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303



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



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

## Articles of Amendment to Articles of Incorporation of

Superior Home Energy Improvement Services Inc.

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Superior nome ratery improvement services inc	<u> </u>
(Name of Corporation as currently	filed with the Florida Dept. of State)
P14000059171	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this $F$ its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
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 addre	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
1Florida stree	the section of
11 tortua svec	4 (ddd) (55)
New Registered Office Address:	
K	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.
Signature of New Reg	gistered 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)

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>	Address
1) Change	P	John Lloyd	501 N Orlando Ave Ste 313-255
X Add		-	Winter Park, FL 32789
Remove			
2) Change	S	Tarya Tribble	6928 US Hwy 301 South
X Add			Riverview, FL 33578
Remove 3 ) Change	_0	Kerny Pierre-Louis	
Add		(	501 N. Orlando Ave
X Remove			Suite 313-255
4)Change			Winter Park, FL 32789
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

् (A#ac	n additional sheets, if necessary).— (Be specific)	•
••		
F. <u>If an</u>	amendment provides for an exchange, reclassificati	on, or cancellation of issued shares,
pro	isions for implementing the amendment if not cont. (if not applicable, indicate N A)	ained in the amendment itself;
	<i>4</i> 111 44 4 11 11 11 11 11 11 11 11 11 11	

The date of each amendment(s) add date this document was signed.	option: if other than the
•	•
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more man 50 days after amenament fae date)
<b>Note:</b> If the date inserted in this blo document's effective date on the Dep	ack does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were adopt action was not required.	ted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendment(s) ficient for approval.
☐ The amendment(s) was/were appromise he separately provided for each	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval
by	
, , , , , , , , , , , , , , , , , , ,	(voting group)
6/5/2020 Dated	retof, president or other officer – if directors or officers have not been
selected, appeinted	by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)
<u>к</u> 	erny Pierre-Louis
	(Typed or printed name of person signing)
	fficer
<del></del>	(Title of person signing)