P14000059630

(R	equestor's Name)	
(Å	ddress)	·
(A	ddress)	
(C	ity/State/Zip/Phone	∍ #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	· · · · · · · · · · · · · · · · · · ·
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DIVISION OF CORPORATIONS

1. Lewis 9-25-14

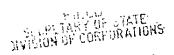
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	REYCRU S	SERVICES INC	
DOCUMENT NUM	_{IBER:} P1400005963	0	
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
	Claudia Escobar	Reyes	
		Name of Contact Person	
	CBS Financial Cf	PA PA	
		Firm/ Company	
	6075 W Commer	cial Blvd	
		Address	
	Tamarac, FL 333	19	
		City/ State and Zip Code	
	E-mail address: (to be us	sed for future annual report	notification)
•	f		•
For further informati	on concerning this matter, pleas	se call:	
Claudia		at (954	, 724-4141
Name	e of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Horida Depa	rtment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
М	ailing Address	Street	Address
Aı	mendment Section		ment Section
	vision of Corporations		on of Corporations
	O. Box 6327 Illahassee, FL 32314		Building xecutive Center Circle
1 6	11101103366. I D J4217	20011	AUGUSTU CUITUI CIIVIV

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



REYCRU SERVICES INC

REYCRU SERVICES IN	C		14 SEP 18 1	PH 1:51
(Name of Corporation as	currently filed with the	Florida Dept. of State)	14 351-14	-
P14000059630				
(Documen	nt Number of Corporation	(if known)		-
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation	adopts the followin	g amendment(s) to
A. If amending name, enter the new note REYCRU HOME IMPRO		ISTALLATIONS,	INC	The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc." or	"Co". A professional corp	rporated" or the a poration name must	bbreviation
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		N/A		
				<u>-</u>
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)		N/A		-
D. If amending the registered agent an			name of the	-
new registered agent and/or the new		ss:		
Name of New Registered Agent	N/A			
				
	(Florida s	treet address)		
New Registered Office Address:	(0)	, Flori		-
	(Cit)	7)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ions of the position.	
	<i>y</i>	,		
Si.	gnature 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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
() Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			- Alle Alle Alle Alle Alle Alle Alle All
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change Add			
Remove			
L Keniove			

Attach additional sheets, if necessary).	(Be specific)			
ease add EIN 47-1340125				
				
	 			
•				
If an amendment provides for an exchiprovisions for implementing the amer	<u>ange, reclassificati</u> ndment if not cont	on, or cancellation a sined in the amenda	of issued shares,	
· · · · · · · · · · · · · · · · · · ·	Tanada II Hot cont	med in the amend		
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)			<u> </u>	-
(if not applicable, indicate N/A)				
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(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

The date of each amendment(s) adoption: September 11, 2014 if other than the date this document was signed. September 11, 2014 Effective date if applicable: (no more than 90 days after amendment file date) (CHECK ONE) Adoption of Amendment(s) 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 amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated_September 11, 2014 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) Edmundo Reves (Typed or printed name of person signing) **PVTD** (Title of person signing)