P15000088390

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: PBR BUILDERS I	NC			
DOCUMENT NUM	P15000088300				
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Hiadys Mayor De Leon				
		Name of Contact Person	1	-	
	Guardian of Property of Mari	o and Leslie Rodriguez			
	Firm/ Company			-	
	3692 3rd Ave NW				
Address			•		
Naples, FL 34119					
		City/ State and Zip Code	2	-	
	elie34120@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:	•	FIG.	2923 JUN -5
Iliadys Mayor De Le	eon	239 at (298-9297	255 255	الل
Name	of Contact Person		de & Daytime Telephone Numbe	er (SE)	င်ာ
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		H4 2
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	STATE F, FL	2: 03
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

Articles of Amendment to Articles of Incorporation of

Þ	R₽	Ri	rild	lers	Inc

		= 17. ·
(<u>Name (</u>	of Corporation as curre	ntly filed with the Florida Dept. of State)
P15000088390		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
		The new
	'orp," "Inc." or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word 1."
B. Enter new principal office address,	if annlicable:	Hiadys Mayor De Leon. Guardian of Mario and Leslie Rock
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		3692 3rd Ave NW
		Naples, FL 34119
(Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new	id/or registered office ac	
new regimered agent and/or the ne		Guardian of Mario and Leslie Rodriguez
Name of New Registered Agent		Guardian of Mario and Leslie Rodriguez S S S S S S S S S S S S S
	3692 3rd Ave NW	<u> </u>
		street address)
New Registered Office Address:	Naples FL	, Florida
		(City) (Zip Càille) $\stackrel{\text{Cond}}{\hookrightarrow}$ $\stackrel{\text{Cond}}{\hookrightarrow}$ $\stackrel{\text{Cond}}{\hookrightarrow}$ $\stackrel{\text{Cond}}{\hookrightarrow}$
New Registered Agent's Signature, if c	hanging Registered Age	nt·
		r with and accept the obligations of the position.
		1
	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)

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>	<u>Addres</u> s
1) ^N Change	РТ	Hiadys Mayor De Leon	3692 3rd Ave NW
Add		Guardian of Mano and VESLIE RODVIGUEL	Naples. FL 34119
Remove			
2) Change			
Add			
Remove 3) Change			
Add			ALL JU
Remove			<u> </u>
4) Change			
Add			<u> </u>
Remove			' '
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Articles, enter change(s) here	
Attach additional sheets, it necessary) — (Be specific)	
	
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	VIII.
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f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	***
(if not applicable, indicate N/A)	<u></u>
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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 amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) 5/24/2023 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)

> Thay's Mayor de Hor (Typed or printed name of person signing) President.

> > (Title of person signing)

ECULTANA OF STATE