P150000 90116

(Requestor's Name)					
(Add	dress)				
(Address)					
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
	-: F-A'6 - N1				
(Bu	siness Entity Nan	ne)			
(Do	cument Number)				
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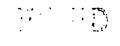
TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Paradise Complete Property Maintenance Inc. DOCUMENT NUMBER: P15000090116 The enclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: Ralph Diaz Name of Contact Person Paradise Complete Property Maintenance Inc. Firm/ Company 7002 nw 40 pl Address Coral Surings Fl 33065 City/ State and Zip Code Paradiseallinone@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ralph Diaz Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



2019 JUN 28 AH 9: 56

Paradise Complete Property Maintenance Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
P15000090116
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
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 address in Florida, enter the name of the new registered agent and/or the new registered office address:
new registered agent and/or the new registered office address.
Name of New Registered Agent
(Florida street address)
New Registered Office Address: Florida
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept 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.

X Change	<u>FT</u> 7	ohn Doe	
X Remove	<u>v</u> <u>w</u>	<u>1 ike Jones</u>	
_X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	Title	Name	<u>Address</u>
1) Change	sv	Angelica Diaz	7002 nw 40 pl
X Add			Coral Springs Fl 33065
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
 	
	
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an amendment provides for an exchorovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
	

	6-24-2019		
The date of each amendment(s date this document was signed.	adoption:		, if other than the
	-24-2019		
Effective date if applicable:	(no more than 90 c	days after amendment file date)	
Note: If the date inserted in the document's effective date on the		ole statutory filing requirements, this date wil	If not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were by the shareholders was/were		umber of votes cast for the amendment(s)	
	approved by the shareholders throug for each voting group entitled to vol	th voting groups. The following statement te separately on the amendment(s):	
"The number of votes of	ast for the amendment(s) was/were s	sufficient for approval	
by	(voting group)	"	
	(voting group)		
☐ The amendment(s) was/were action was not required.	adopted by the board of directors wi	thout shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators withou	it shareholder action and shareholder	
6-24-20	19		
Dated Signature	Rold Oc	<u> </u>	
(By sele	a director, president or other officer cted, by an incorporator – if in the h binted fiduciary by that fiduciary)	- if directors or officers have not been ands of a receiver, trustee, or other court	_
	Ralph Diaz		
	(Typed or printed nar	me of person signing)	
	President		
	(Title of p	person signing)	