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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: OVERTIME CONT	TRACTORS SERVICES.	INC.
DOCUMENT NUMB		<u>-</u>	
The enclosed Articles of	f Amendment and fee are sub	omitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
(ILBERTO E. SANCHEZ		
-	 	Name of Contact Perso	n
(OVERTIME CONTRACTOR	RS SERVICES, INC.	
_		Firm/ Company	
;	760 NW 97 AVE #107		
-	· <u>·</u>	Address	
:	MIAMI, FL 33178		<u> </u>
		City/ State and Zip Cod	le
(vertimecs@gmail.com		
-	E-mail address: (to be us	ed for future annual repor	t notification)
For further information	concerning this matter, pleas		
GILBERTO E. SANCHEZ		at ()
Name of Contact Person		Area Co	ode & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment 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)
Amer Divis P.O.	ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314	Amen Divisi The C 2415	Address dment Section on of Corporations Tentre of Tallahassee N. Monroe Street, Suite 810 hassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

to

	OVERTIME CONTRAC	TORS	SERVICES	INC
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Check if applicable

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

OVERTIME CONTRACTORS SERVICE				
P16000038618	of Corporation as curren	tly filed with the Florida Dept. of S	tate)	
-	(Document 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 following am	endment(s)
A. If amending name, enter the new n	ame of the corporation:			
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contracted," "professional association."	Corp," "Inc," or "Co".	A professional corporation name i	abbreviation "C	e new Corp.," e word
B. Enter new principal office address,		GILBERTO E. SANCHEZ		
(Principal office address MUST BE A STREET ADDRESS)		8760 NW 97 AVE #107		
		DORAL, FL 33178	000 000 1707	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			AUG - 3	
			9 ST 8:	
D. If amending the registered agent an new registered agent and/or the ne	nd/or registered office addres w registered office addres	dress in Florida, enter the name of	the S	,
Name of New Registered Agent	GILBERTO E. SANCHE	SZ		
	8760 NW 97 AVE #107			
	·	treet address)		
New Registered Office Address:	DORAL	, Flor		
		(Ciṇ)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen tered agent. I am familiar	nt: with and accept the obligations of th	se position.	
	_//11/1/1			
Check if applicable	(Sygnature offlyew)	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)

Example:

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	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l) Change	P	JACQUELINE URRIBARRI	8760 NW 97 AVE #107
Add X _			DORAL FL 33178
Remove 2) Change	VP	IVAN GONZALEZ	11521 SW 100 STREET
Add			MIAMI, FL 33176
X Remove Change	P	GILBERTO E. SANCHEZ	8760 NW 97 AVE #107 DORAL FL 33178
X Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
f) Change			
Add			
Remove			

(Attach additional sheets, if necess	al Articles, enter change(s) sary). (Be specific)		
			
			
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f an amendment provides for a	n exchange, reclassification	n, or cancellation of issu	ed shares.
provisions for implementing th	e amendment if not contain	ned in the amendment i	<u>tself:</u>
	7A)		
(if not applicable, indicate N			
(ij noi applicable, indicate N			
(ij not applicable, indicate N		 	
(if not applicable, indicate N			
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(ij noi applicable, indicate N			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more i	han 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's reco	applicable statutory filing requirements, this date will not be listed as the ords.
Adoption of Amendment(s) (CHECK ONE	
☐ The amendment(s) was/were adopted by the incorporate action was not required.	rs, or board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	s. The number of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholde must be separately provided for each voting group entities.	ers through voting groups. The following statement led to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) w	as/were sufficient for approval
by	•
(voling group)	·
07/08/2021 Dated	
Signature Tocqueline Ur	
	Fofficer – if directors or officers have not been f in the hands of a receiver, trustee, or other court ciary)
JACQUELINE URRIB	ARRI
(Typed or pr	inted name of person signing)
PRESIDENT	
(Title of pers	on signing)