P160000 47020

(Re	equestor's Name)	
(Ad	ldress)	
·	ŕ	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



000299040260

05/16/17--01019--028 **35,00

MAY 16 P # 12 SECRETARY OF STATE

MAY 22 2017

T. LEMIEUX



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	J&J HOME ENE	RGY SAVERS,	CORP.		
DOCUMENT NUMBER:	P16000047020				
The enclosed Articles of Amend	<i>ment</i> and fee are su	abmitted for filing	5 .		
Please return all correspondence	concerning this ma	itter to the followi	ing:		
IRIS JAN	ET GONZALEZ				
 		Name of Con	tact Perso	n	
J&J HOM	J&J HOME ENERGY SAVERS, CORP.				
		Firm/ Cor	mpany		
120 BRO.	ADWAY, SUIE 20	4			
		Addre	ess		
KISSIMN	EE, FL 34741				
		City/ State and	d Zip Cod	е	-
janetjjhes@gma	il.com				
E-ma	il address: (to be us	sed for future ann	ual report	notification))
For further information concerning		se call:	321	`	805-0883
Name of Contact	Person	at () de & Daytin	ne Telephone Number
Enclosed is a check for the follow	ving amount made	payable to the Flo		•	•
■ \$35 Filing Fee □\$43 Cer	3.75 Filing Fee & tificate of Status	□\$43.75 Filing Certified Cop (Additional copenclosed)	рy	Certifie	ate of Status d Copy onal Copy
Amendment Se Division of Co P.O. Box 6327	Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		ations nter Circle		

Articles of Amendment to Articles of Incorporation of

N/A			
(Name of Corporation as current	tly filed with the Florida De	ept. of State)	
N/A			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation	adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the corporation:			
N/A			The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corpo		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address NA Name of New Registered Agent		ame of the	_
(Florida si	treet address)		_
New Registered Office Address: N/A		. Florida	
	(City)		Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		ons of the position.	
Signature of New	Registered Agent, if changing		-
		1017-MAY 16 SECRETARY O LLAHASSEE,	

address of each Officer (Attach additional sheets Please note the officer/di P = President; V= Vice Executive Officer; CFO held. President, Treasure Changes should be noted	and/or D , if necess irector titl President = Chief I er, Directo in the fo	eary) The by the first letter of the office title: The treasurer; S= Secretary; D= Director; TR= The second of the control o	Frustee; C = Chairman or Clerk; CEC than one title, list the first letter of ea PST and Mike Jones is listed as the V.
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 \	S/TR	SUHAIL VARGAS	13562 MEADOW BAY LOOP
Add			ORLANDO, FL 32824
XX Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			

There is Change,

Add

_ Remove

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
· · · · · · · · · · · · · · · · · · ·	
F. If 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)	

The date of each amendment(s) a	doption:	
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendm afficient for approval.	ent(s)
	proved by the shareholders through voting groups. The following star each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	, 27	
•	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareh	nolder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholde	er
AF Dated	RIL 10, 2017	
Signature	500	
(By a consequence)	director, president or other officer – if directors or officers have not bed, by an incorporator – if in the hands of a receiver, trustee, or other ated fiduciary by that fiduciary)	
	IRIS JANET GONZALEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	