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COVER LETTER

TO:	: Amendment Section				
	Division of Comorations				

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NAME OF CORPOR	AIIUN:	PLIANCE CONTRACTO	RINC
DOCUMENT NUMB	ER: P16000068949		
	f Amendment and fee are st	abmitted for filing.	
Please return all corresp	ondence concerning this me	atter to the following:	
,	WILLIAM RIVERA		
-		Name of Contact Person	n
-		Firm/ Company	•
2	116 HIDDEN SPRINGS C	IR	
		Address	
_	KISSIMMEE, FL 34743		
		City/ State and Zip Cod	÷
WILL	AMRIVERA6663@GMAIL	COM	
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
WILLIAM RIVERA		ลเ (407	de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314		Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation of

UNIVERSAL APPLIANCE CONTRACTOR INC		
(Name of Corporation as current) P1(4)000) (89149	tly filed with the Florida Dept. of Sta	te)
(Document Number of	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	e following amendment(s) to
A. If amending name, enter the new name of the corporation:		
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 corporation nat	The new or the abbreviation me must contain the
B. Enter new principal office address, if applicable:	3822 OYSTER CT	
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO FL, 32812	S
		P 1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3822 OYSTER CT	ASSERTE TO THE TOTAL PROPERTY OF THE TOTAL P
	ORLANDO FL. 32812	- <u>G</u> 55
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address Name of New Registered Agent		<u> </u>
(Florida st	reet 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		ostiion.

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	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	V	RUTH MERCEDES	2578 EGRET LOOP
Add			PKISSIMMEE, FL 34743
X Remove			
2) Change	٧	ROSANNY ROSARIO	216 HIDDEN SPRINGS CIR
Add			KISSIMMEE, FL 34743
X Remove			
3) Change	T	EDDY CARLOS QUIROZ	5116 STRATEMEYER DR
X Add			ORLANDO, 32839
Remove			
4) Change	s	EDDY ALEJANDRO QUIROZ	3822 OYSTER CT
X Add	-		ORLANDO, FL 32812
Ксточе			
5) Change			
Vqq			
Remove			
6)Change			
Add		····	
Romove			

	ding additional Ar heets, if necessary).	(Be specific)				
						
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if a <u>n amendme</u> nt	provides for an ex- plementing the anable, indicate N/A)	hange, rectassi endment if not	fication, or conce contained in the	ellution of issued a mendment itself	shares, <u>:</u>	
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To:18506176380

The date of each amendment(s)	adoption:	, if other than the
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 document's effective date on the I	block does not meet the applicable statutory filing requirements, this date partment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amondment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amondment(sufficient for approval.	i)
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
Ъу	(voting group)	
-	(voting group)	
☐ The amendment(s) was/were acction was not required.	dopted by the board of directors without shareholder action and shareholde	π
☐ The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder	
09/17/20	18	
Dated		
Signature 4		
(By≨r	director, president or other officer - if directors or officers have not been	
	ied, by an incorporator – if in the hands of a receiver, trustee, or other cour	t
appoi	nted fiduciary by that fiduciary)	
	WILLIAM RIVERA	
	(Typed or printed name of person signing)	-
	PRESIDENT	
	(Title of person signing)	