P16000100892

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	PRATION: CONSTRUCTION	SERVICES MONT	TEL INC	
	IBER: P16000100892			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	ISMAEL MONTIEL			
		Name of Contact	Person	
	CONSTRUCTION SERVICES MONTIEL INC			
		Firm/ Compa	ny	
	1362 BOULDER DRIVE			
		Address		
	KISSIMMEE, FLORIDA 34	744		
		City/ State and Zi	p Code	
	KINGDRYWALL@YAHO	O.COM		
	E-mail address: (to be us	sed for future annual	report notil	ication)
For further informati	on concerning this matter, pleas	se call: at (3	36	409 - 6212
Name	of Contact Person	at (Ar) ea Code &	Daytime Telephone Number
Enclosed is a check f	or the following amount made			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing For Certified Copy (Additional copy enclosed)	is (\$52.50 Filing Fee Certificate of Status Certified Copy Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Г 1 2	he Centre	Section Corporations of Tallahassee onroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

FILED

CONSTRUCTION SERVICES MONTIEL INC		2022 OCT 27 PH 5: 31
(Name of Corporation	n as currently filed with the Flor	ida Dept. of State)
P16000100892		SECRE AND STATE
(Docume	ent Number of Corporation (if know	wn)
Pursuant to the provisions of section 607,1006, Florida Staticles of Incorporation:	Statutes, this <i>Florida Profit Corpo</i>	ration adopts the following amendment
A. If amending name, enter the new name of the cor	poration:	
name must be distinguishable and contain the word "cor" Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A professional corpo-	
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
. If amending the registered agent and/or registere new registered agent and/or the new registered of		the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. It		ligations of the position.
Signati	ure of New Registered Agent, if che	
Signai	are of trew ivegistered Agent, if the	mgmg
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, 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office the 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. Their 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 Charlike 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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	ALFREDO NATERA	5339 KESWICK COURT
X Add			ORLANDO, FLORIDA 32812
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach	iding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
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. <u>If an ar</u> provis	nendment provides for an exchange, reclassification, or cancellation of issued shares, ions for implementing the amendment if not contained in the amendment itself:
(if	not applicable, indicate N/A)
-	

AUGUST 1, 2022	
	if other tha
date this document was signed.	
AUGUST 1, 2022	
Effective date <u>if applicable</u> : (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 locument's effective date on the Department of State's records.	be listed
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shar action was not required.	reholder
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	
by``	
(voting group)	
OCTOBER 24, 2022 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)	
ISMAEL MONTIEL	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	