P170000000385

(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

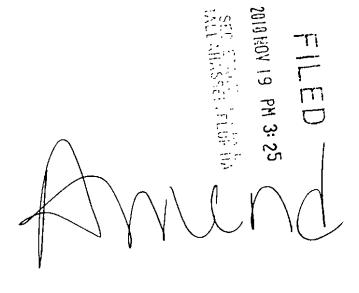
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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: 29/+	n Renovation	1 Inc	
DOCUMENT NUMB	BER: <u>P170()0(</u>	726385		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Em	ilio Gart	h	
		Name of Contact Person		
		Firm/ Company	· · · · · · · · · · · · · · · · ·	·
	3890	• •	ove Way 5	<u>;</u>
		11001000		
	Jacksonulle	F L 3	1257 e	
		inprovement Bosed for future annual report		
For further information	n concerning this matter, pleas	se call:		
En, I.	of Contact Person	at (C t ·)) <u>434- 0848</u> de & Daytime Telephone Nun	mber
				noci
	r 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)	-
Mai	ling Addrose	Street	Addrago	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

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	Articles of Incorpo	ration	1 4	
	of	Ť	due to re	eturned check
(-« r+1	h Renovati	01 11	C.	
(Name of Corp	poration as currently file	d with the Florida	Dept. of State)	
ρ	1700002638	5		
	Document Number of Corp)	
Pursuant to the provisions of section 607.1006, I its Articles of Incorporation:	Florida Statutes, this <i>Flori</i> d	da Profit Corporat	tion adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new name of	the corporation:			
$\mathcal{N}_{\mathcal{I}}$	/ A			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association," of	"Corp," "Inc," or "Co".	A professional co		
B. Enter new principal office address, if appl	icable:	N/	A	
(Principal office address MUST BE A STREET			· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable: (Mailing address MAY BEA POST OFFIC D. If amending the registered agent and/or re		n Florida, enter th	A A anne of the	10 10 PT 3: 25
new registered agent and/or the new regis				
Name of New Registered Agent	Emilia.	Gorth		
		eratore W	12y 5	
New Registered Office Address:	Jacksonulle		Florida	32257
New Registered Office Address.	(City)	,	t torida_	3 2257 (Zip Code)
New Registered Agent's Signature, if changin I hereby accept the appointment as registered a		ind accept the obli	gations of the po	isition.
	Signature of New Regist	ered Agent, if char	nging	

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	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1)Change	5 Fernando G. Perez	10275 OIJ ST
X Add		Augustine Rd Apt 516
Remove	Filing cancelled	Jacksonville Fl 32257
2) Change	due to returned check	
Add		
Remove		-
3) Change		
Add		
Remove		-
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

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	s, if necessary). ((Be specific)		
		N/A		
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an amendment prov	<u>ides for an exchar</u> nenting the amend	nge, reclassification, o Iment if not contained	r cancellation of iss in the amendment	ueu snares, itself:
(if not applicable,	indicate N/A)	/ ,		
	N	1/1		
	1	(·····	
			 	
			193.0384	
			112.438	

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The date of each amendment(s) adoption:	NA	, if other than the
date this document was signed.		
Effective date if applicable:	10/30/2014 (no more than 90 days after amendment file	
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this block does not document's effective date on the Department of St		rements, this date will not be listed as the
Adoption of Amendment(s) (CHE	CK ONE)	
The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for ap		ne amendment(s)
☐ The amendment(s) was/were approved by the s must be separately provided for each voting g		
"The number of votes east for the amend		
by	" " " " " " " " " " " " " " " " " " "	
(votin	ng group)	
☐ The amendment(s) was/were adopted by the boaction was not required.	oard of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adopted by the in action was not required.	ncorporators without shareholder action and	shareholder
Dated 10/30/	2018 - (anding	
	lent or other officer – if directors or officers	have not been
	porator – if in the hands of a receiver, truste	
appointed fiduciary b	•	
	Enilio GARTIL	
<u></u>	Typed or printed name of person signing)	
	P	
	(Title of person signing)	