P17000031588

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(Business Entity Name) (Document Number)	
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05/23/17--01008--022 **35.

Among

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: LPM ARCHI SER	VICES CORP	- CM - M
DOCUMENT NUMBER			
The enclosed Articles of A	Imendment and fee are su	bmitted for filing.	
Please return all correspon	ndence concerning this ma	tter to the following:	
JUI	LIANA PIETA		
		Name of Contact Perso	n
TA	X CONTROLLER INC		
<u></u>		Firm/ Company	
750	E SAMPLE RD BLG 3 I	, ,	
		Address	
PO	MPANO BEACH FL 330	64	
		City/ State and Zip Cod	e
JULIANA	A@TAXCONTROLLER.	СОМ	
	E-mail address: (to be us	ed for future annual report	notification)
For further information co	ncerning this matter, pleas	e call:	
JULIANA PIETA		954 at (de & Daytime Telephone Number
Name of C	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	e following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fec	□\$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 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LPM ARCHI SERVICES CORP		72 ·
(Name of Corporati	ion as currently filed with the Florida Dept. of State)	Ę.
217000031588		ين ُ
(Docum	ment Number of Corporation (if known)	
ursuant to the provisions of section 607.1006, Florida s Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following	ng amendment(s)
If amending name, enter the new name of the co	orporation:	
		The new
ame must be distinguishable and contain the wor Corp.," "Inc.," or Co.," or the designation "Corp, ord "chartered," "professional association," or the	rd "corporation," "company," or "incorporated" or the e o," "Inc," or "Co". A professional corporation name must abbreviation "P.A."	abbreviation contain the
. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)	
	red office address in Florida, enter the name of the	
new registered agent and/or the new registered	office address:	
Name of New Registered Agent		_
<u> </u>		
	(Florida street address)	_
New Registered Office Address:	(Florida street address)	_

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	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change	P		TAMARA VARONI	10253 BROOKVILLE LN
Add				BOCA RATON FL 33428
X Remove				
2) X Change	<u>P</u>		LUIZ PHILIPE M FERNANDES	10253 BROOKVILLE LN
Add				BOCA RATON FL 33428
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Pemove				

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
<u> </u>	
f an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
05/17/17 Dated		
Signature	The state of the s	
selecte	irector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	LUIZ PHILIPE MARQUES FERNANDES	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	