

P17000034031

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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17 JUN 21 AM 6:38  
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TALLAHASSEE, FLORIDA

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*Amend ✓*

JUN 28 2017

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

17 JUN 21 AM 11:58

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

May 31, 2017

ORIENT PREVIL  
5340 NW 55TH BLVD., APT 101  
COCONUT CREEK, FL 33073

SUBJECT: CREATIVE RENOVATION & CONSTRUCTION CORP.  
Ref. Number: P17000034031

We have received your document for CREATIVE RENOVATION & CONSTRUCTION CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 417A00010921

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: CREATIVE RENOVATION & CONSTRUCTION CORP.  
DOCUMENT NUMBER: P17000034031

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ORIENT PREVIL

Name of Contact Person

Firm/ Company

5340 NW 55<sup>th</sup> Blvd Apt 101

Address

COCONUT CREEK, FL 33073

City/ State and Zip Code

PREVILORIENT@yahoo.com ✓

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ORIENT PREVIL

Name of Contact Person

at ( 561 ) 961-9711

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|---|--|---|--|

**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  
to  
Articles of Incorporation  
of

FILED  
17 JUN 21 AM 8:33  
SECRETARY  
TALLAHASSEE  
FLORIDA

CREATIVE RENOVATION & CONSTRUCTION CORP.  
(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

2975 XL COMMERCIAL BLVD  
FORT LAUDERDALE, FL 33309.

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

SAME AS PRINCIPAL OFFICE.

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent ORIENT PREVIL  
5340 NW 55<sup>TH</sup> BLVD APT 101  
(Florida street address)

New Registered Office Address: COCONUT CREEK, Florida 33073  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*



Signature of New Registered Agent, if changing

**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 Doe  
X Remove      V      Mike Jones  
X Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change ___ Add ___ Remove	<u>P</u>	<u>FERNANDO Castrillon</u>	<u>1891 SW 81 AVE</u> <u>NORTH LAUDERDALE FL 33068</u>
2) ___ Change <u>X</u> Add ___ Remove	<u>VP</u>	<u>GIOVANI NOEL</u>	<u>8285 IRONGATE PL</u> <u>BOCA RATON FL 33433</u>
3) ___ Change <u>X</u> Add ___ Remove	<u>T</u>	<u>WALLY DORLUS</u>	<u>5031 NW 18<sup>th</sup> St</u> <u>LAUDERHILL FL 33313</u>
4) ___ Change <u>X</u> Add ___ Remove	<u>Sec</u>	<u>ORIENT PREVIL</u>	<u>5340 NW 55 Blvd Apt 101</u> <u>COCONUT CREEK FL 33073</u>
5) ___ Change ___ Add ___ Remove	___	___	___
6) ___ 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) adoption: \_\_\_\_\_, if other than the date this document was signed.

May 19, 2017

Effective date if applicable: \_\_\_\_\_

May 19, 2017

(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 be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

☒ 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)

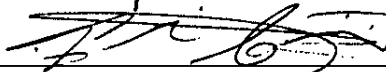
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated

May 19, 2017

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)

FERNANDO CASTRILLON

(Typed or printed name of person signing)

President

(Title of person signing)