P17000045441

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COVER LETTER

Division of Corporations			
NAME OF CORPORATION: <u>CC Limitless INStallations</u> DOCUMENT NUMBER: <u>P17000045441</u>			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Christopher Rodeiguez Name of Contact Person CC Limit less Tristallations Tric Firm/ Company Lo305 Cottonwood Lane Address Apollo Beach, FL 33572 City/ State and Zip Code ARODOS956 amail. Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Chicis for hear Rodaiguez at (813) 360-4768 Name of Contact Person Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certified Copy (Additional Copy is enclosed)			

Mailing Address

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

TO: Amendment Section

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

Articles of Amendment

Articles of Incorporation of

CC Limitless	Installations
· · · · · · · · · · · · · · · · · · ·	rently filed with the Florida Dept. of State)
P170000	45441
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporatio	<u>n:</u>
	TheThe
	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	12 -
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	2
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad-	
Name of New Registered Agent	
(Flori	ida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am familiary	
Signature of N	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.

Mike Jones, V as Ren Example:	nove, and Sally Smith, SV as an Add.	
X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	OFFicer Daniel Sames	_
Add Remove		Brandon, FL 33511
Remove		
2) Change	Officer Jose Medina	944 Nina Elizaboth Cir
<u></u> ∧dd		Ap+ 301 Beandon, FL 33510
Remove		Beandon, FL 33510
3)Change		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

	dding additional A I sheets, if necessary). (Be specific)	<u> </u>		
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		· · · · · · · · · · · · · · · · · · ·	··		
an amendmei	<u>t provides for an ex</u>	change, reclassific	cation, or cancella	ation of issued sha	res.
rovisions for	mplementing the ar	nendment if not co	ontained in the an	nendment itself:	
(if not appi	cable, indicate N/A)				
					<u>-</u>
					
		· · · · · · · · · · · · · · · · · · ·		·	
					

The date of each amendment(s) adoption: 3-1-19 Nemoved Danie / Sames if other than the
date this document was signed.
The date of each amendment(s) adoption: 3-1-19 Removed Danie Sames , if other than the date this document was signed. Effective date if applicable: 3-11-19 Added Jose Medinal (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)
(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 3-11-19 Signature 212
Signature Z/Z
(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)
Christopher Rodriguez (Typed of printed name of person signing)
(Typed of printed name of person signing)
PRES
(Title of person signing)