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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Harvin Depair Services INC.
DOCUMENT NUMBER: P1700052264
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Angela M Ouber, ESD. Name of Contact Person Huber Law Grup Pl Firm/ Company 17231 Carnelot (Duret, Land O'Lakos, Fl 34638) Address Address 13363 Linder dv 377in Hill34600 City/ State and Zip Code Havyin dlaz93 Danail room E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Area Code & Daytime Telephone Number Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

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2022 OCT 11
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of	2022	
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Harvin Ropair Services INC.	SEGRITAGE	<u> </u>
(Name of Corporation as currently filed with the Florida Dept.	of Store)[AT (SKY	GF 6
P17000052264		$F_{UH,\alpha}^{\sigma H,T_{\alpha}}$
(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 world "corporation," "cor	mpany," or "incorporated" or the abbreviation "Corp.,"
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A J	projessional corporation name must contain the north
"chartered," "professional association," or the abbreviation "P.A."	55 11/2/1 1/1/
B. Enter new principal office address, if applicable:	20107 Wildmood dr.
(Principal office address MUST BE A STREET ADDRESS)	Brooksville 34601 Vil
	<u>-</u> -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	20107 Wildwood Dr.
	Brooksville, FL 34601
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	
W CN British Com Stub OC	Law Group PL
Name of New Registered Agent (1)(1) (1)	7 Jan 1 1 1 1 1 1 1 1 1 3463
17231 Come	161 Cours Land O' Lakes, FL 3463
	_
1723/ CAM	elot Prillet _, Florida 34638
New Registered Office Address: 17231 (Atn	City) Killed C' Yorko S (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.

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, 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	<u>PT</u>	John Doe
X Remove	$\underline{\mathbf{v}}$	Mike Jones
X Add	<u>sv</u>	Sally Smith
Type of Action (Check One)	<u>Title</u>	Name Address
1) Change		Addiel Torry Rojas 4710 AEGEAN AVO. Holiday 346°
X Add		1 AVa. Holiday 346°
Remove		/
2) Change		
Add		
Remove Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		-
Remove		
6) Change		
Add		
Remove		

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)				
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an amendment provides for an exch	ange, reclassifi	cation, or cane	ellation of issued	l shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not e	ontained in the	amendment its	elf:	
(9					
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The date of each amendment(s) ado date this document was signed.	ption:	Sept	PINIDOV	$\frac{\partial I_{i}}{\partial I_{i}}$	<u> </u>	, if other than the
Effective date if applicable:	Sept	ember	21	3026	ent file date)	
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Note: If the date inserted in this blo document's effective date on the Department				tutory filing	requirements	, this date will not be listed as the
Adoption of Amendment(s)	(CHEC	CK ONE)				
The amendment(s) was/were adopt action was not required.	ted by the inc	corporators,	, or board of	directors wi	thout shareho	lder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	•		The numbe	r of votes ca	st for the ame	ndment(s)
☐ The amendment(s) was/were appromust be separately provided for ea						
"The number of votes cast fo	or the amendr	nent(s) was	s/were suffic	ient for appr	oval	
by					.,,	
,	(voting	group)				
Dated	121/20	222				
Signature	\					
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	by∖an incorp d fiduciary by			of a receiver	, trustee, or of	her court
appointed	(1		(M. y)			
	Har	UM	Dia	2		
	(Ту	ped or prin	ted name of	person signi	ing)	
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