## P17000075991

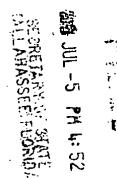
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| PICK-UP WAIT MAIL                       |
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| Special Instructions to Filing Officer: |
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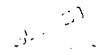
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

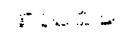
## JUL -5 PH 4: 52

SECRETARY OF STATE TALEAWASSEEFFEORIDS

| NAME OF CORPO           | RATION: HECTOR & VAN                        | ESSA ENTERPRISE INC  | ` 1   |  |  |  |
|-------------------------|---|--|---|--|--|--|
|                         | BER: P17000075991                           |  |   |  |  |  |
| The enclosed Article.   | s of Amendment and fee are su               | bmitted for filing.  |   |  |  |  |
| Please return all corre | espondence concerning this ma               | tter to the following:   |   |  |  |  |
|                         | LUIS HECTOR JARAMILL                        | О  |   |  |  |  |
|                         | Name of Contact Person                      |  |   |  |  |  |
|                         | HECTOR & VANESSA ENTERPRISE INC             |  |   |  |  |  |
|                         |   | Firm/ Company  |   |  |  |  |
|                         | 5803 STONEWALL JACKS                        | ON RD  |   |  |  |  |
|                         | Address                                     |  |   |  |  |  |
|                         | ORLANDO FL 32807                            |  |   |  |  |  |
|                         |   | City/ State and Zip Coo  | de  |  |  |  |
| • • •                   | nonioacuores e coss                         |  |   |  |  |  |
| MA                      | RCRIO7@HOTMAIL.COM                          | sed for future annual repor  |   |  |  |  |
| Sar furthar informati   | on concerning this matter, pleas            |  |   |  |  |  |
| or turner miornan       | on concerning this matter, pieas            | se can.  |   |  |  |  |
| LUIS H JARAMILL         | ()  | at (   | 435-7703  |  |  |  |
| Name                    | of Contact Person                           |  | ode & Daytime Telephone Number  |  |  |  |
| Enclosed is a check f   | or the following amount made                | payable to the Florida Dep   | partment of State:  |  |  |  |
| \$35 Filing Fee         | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |  |  |
| Mailing Address         |   |  | t Address   |  |  |  |
|                         | nendment Section                            | Amendment Section  |   |  |  |  |
|                         | vision of Corporations  D. Box 6327         | Division of Corporations Clitton Building                          |   |  |  |  |
|                         | Hahassee, FL 32314                          | 2661 Executive Center Circle                                       |   |  |  |  |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



HECTOR & VANESSA ENTERPRISE INC

纜 JUL -5 PH 4: 52

| (Name of Corpora  | ation as currently filed with the Florid       |   |
|---|--|---|
| P17000075991  |  | TAULAHASSEEN FUBRION  |
| (Doc  | ument Number of Corporation (if know           | n)  |
| Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:  | ida Statutes, this Florida Profit Corpor       | ation adopts the following amendment                                |
| A. If amending name, enter the new name of the  | corporation:                                   |   |
| H & B REMODELING SERVICES INC   |  | The new   |
| name must be distinguishable and contain the w<br>"Corp.," "Inc.," or Co.," or the designation "Co-<br>word "chartered," "professional association," or the | rp," "Inc," or "Co". A professional            | incorporated" or the abbreviation corporation name must contain the |
| B. Enter new principal office address, if applicat  |  |   |
| (Principal office address MUST BE A STREET AL   | <u>DDRESS</u> )·                               |   |
|   | <del></del>                                    |   |
|   | -  |   |
| C. Enter new mailing address, if applicable:  | PAVI   |   |
| (Mailing address <u>MAY BE A POST OFFICE E</u>  | <u></u>  |   |
|   |  |   |
|   |  |   |
| D. If amending the registered agent and/or regis  | tered office address in Florida <u>, enter</u> | the name of the   |
| new registered agent and/or the new registere   |  |   |
| Name of New Registered Agent  |  |   |
|   |  |   |
|   | (Florida street address)                       | · <del>-</del>  |
| New Registered Office Address:  |  | , Florida   |
|   | (City)   | (Zip Code)  |
|   |  |   |
| New Registered Agent's Signature, if changing R   | legistered Agent                               |   |
| I hereby accept the appointment as registered agent   |  | ligations of the position.  |
|   |  |   |
|   |  |   |
| Si  | ignature of New Registered Agent, if che       | <br>unging  |

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:<br><u>X</u> Change   | <u>PT</u>    | John Do      | <u>e</u>    |             |                 |
|-------------------------------|--------------|--------------|-------------|-------------|-----------------|
| X Remove                      | <u>V</u>     | Mike Jo      | nes         |             |                 |
| <u>X</u> Add                  | <u>\$V</u>   | Şally Sır    | <u>iith</u> |             |                 |
| Type of Action<br>(Check One) | <u>Title</u> |              | Name        |             | <u>Addres</u> s |
| 1) Change                     |              | _            |             |             |                 |
| Add                           |              |              |             |             |                 |
| Remove                        |              |              |             |             |                 |
| 2) Change                     |              |              |             |             |                 |
| Add                           | -            | <del>-</del> |             | -           |                 |
| Remove                        |              |              |             |             |                 |
| 3 ) Change                    |              |              |             |             |                 |
| Add                           |              | <del></del>  |             |             |                 |
| Remove                        |              |              |             |             |                 |
|                               |              |              |             |             |                 |
| 4) Change                     |              | _            |             | <del></del> |                 |
| Add                           |              |              |             |             |                 |
| Remove                        |              |              |             |             |                 |
| 5) Change                     |              | _            |             | <u>.</u>    |                 |
| Add                           |              |              |             |             |                 |
| Remove                        |              |              |             |             |                 |
|                               |              |              |             |             |                 |
| 6) Change                     |              |              |             |             |                 |
| Add                           |              |              |             |             |                 |
| Remove                        |              |              |             |             |                 |

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| an amendment provides for an exchange, reclassification, or cancellation of is | sued shares,                          |
| provisions for implementing the amendment if not contained in the amendment    | t itself:                             |
| (if not applicable, indicate N/A)  |                                       |
| A  |                                       |
|  |                                       |
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| The date of each amendment(s) adoption:  | , if other than the           |
|--|-------------------------------|
| date this document was signed.   |                               |
| Effective date if applicable:  |                               |
| (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 dedocument's effective date on the Department of State's records.                                    | ate will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE)   |                               |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.  | (s)                           |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):        | ent                           |
| "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 sharehold action was not required.  | er                            |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   |                               |
| 07/01/2019 Dated 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 courappointed fiduciary by that fiduciary) |                               |
| LUIS HECTOR JARAMILLO  |                               |
| (Typed or printed name of person signing)  |                               |
| PRESIDENT  |                               |
| (Title of person signing)  |                               |