## P17000086051

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cid	ty/State/Zip/Phone	⊇ #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
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APR 0 6 2018 S. YOUNG



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 5, 2018

EDWARD LAWRANCE SANTISTEBAN STF HOME RENOVATIONS INC 3401 W NORTH B STREET TAMPA, FL 33609

SUBJECT: STF HOME RENOVATIONS, INC.

Ref. Number: P17000086051

We have received your document for STF HOME RENOVATIONS, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 218A00004382

18 APR -5 PM 1: SECRETARY OF STATEMENT OF ST

## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
	one Renovations Inc.
DOCUMENT NUMBER: P17000	0 86051
The enclosed Articles of Amendment and fee are sub-	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
3401 W. No Tampa, F	Name of Contact Person  Renovations Inc.  Firm/ Company  Address  L 33609  City/ State and Zip Code  Address  The Company  City/ State and Zip Code  City/ State and Zip Code
For further information concerning this matter, please	call:
Edward Santiste ban	at (813 ) 781-5816
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
\$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation

STE Have Pons	vations Inc.
(Name of Corporation as currently f	
N	,
P17000860	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	7
(Principal office address MUST BE A STREET ADDRESS)	in the second second
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addres	s in Florida, enter the name of the
new registered agent and/or the new registered office address:  Name of New Registered Agent  3401 W. Mo  (Florida street)  New Registered Office Address:	Florida_ 336,69
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with	

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check Onc)	<u>Title</u>	Name	Address
	<u></u>	Edward Layrance Santisfeban	3401 W. North BS4.
Add		Santisteban	Tampa, FL
Remove			33609
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

каси ишиню	or adding additional Articles, enter change(s) here: onal sheets, if necessary). (Be specific)
	From Larry Santisteban to Sedward Laurance Santisteban
	or congrame charge
···	from Larry Santisteban to
	State Allandar Santiatada
· <del>-</del> ···································	cavara raurance servirilban
*	
<del></del>	
an amendn	nent provides for an exchange, reclassification, or cancellation of issued shares,
rovisions fa	or implementing the amendment if not contained in the amendment itself:
(if not ap	pplicable, indicate N/A)