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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: ALA SERVIC	ES CONTRUCTION COR	P		
DOCUMENT NUMB	D17000002061				
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.			
Please return all corres	pondence concerning this ma	atter to the following:			
	AMADO MONTORO				
•	Name of Contact Person				
		Firm/ Company			
		Address			
	590 WEST 39TH STREET I	HALEAH FL 33012			
-		City/ State and Zip Coc	le		
For further information	E-mail address: (to be used to be	sed for future annual report se call:	notification)		
AMADO MONTORO	GUILLEN	786 	237-8667		
Name o	f Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 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		Street Address Amendment Section Division of Corporations Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



ALA SERVICES CONTRUCTION CORP		•
(Name of Corporation as currently filed y	with the Florida Dept. of State)	7.
P/701.00921	0104	Q.
(Document Number of Corpor	ation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:	Profit Corporation adopts the following amend	dment(s) to
A. If amending name, enter the new name of the corporation:		
ALA PAINTING SERVICES CORP	The .	17:4147
name must be distinguishable and contain the word "corporation," "co "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A word "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbrevia	ttion
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		_
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If amending the registered agent and/or registered office address in F new registered agent and/or the new registered office address:	lorida, enter the name of the	_
Name of New Registered Agent		
- Anne of the State Country of		
(Florida street addre	55)	
New Registered Office Address: (City)	, Florida(Zip Code)	-
New Registered Agent's Signature, if changing Registered Agent: Thereby 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	<u>PT</u>	John Doc	
X Remove	$\underline{\mathbf{y}}$	Mike Jones	
X Add	\underline{sv}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
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		-
		
-		
		
f an amendment provides for an excha	nge, reclassification, or cance	ellation of issued shares,
provisions for implementing the amen	ument it not contained in the	amendment itself;
(if not applicable, indicate N/A)		
vy not applicable, indicate N/A)		
vy not applicable, indicate N/A)		
vy noi applicable, indicate N/A)		
NJ not applicable, indicate N/A)		
NJ not applicable, indicate N/A)		
NJ not applicable, indicate N/A)		
NJ not applicable, indicate N/A)		

	JANUARY 25, 2017	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	tno more than 90 days after amendment file	date)
Note: If the date inserted in this is document's effective date on the Do	block does not meet the applicable statutory filing require partment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were si	opted by the shareholders. The number of votes east for the	e amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The follower each voting group entitled to vote separately on the amen	lowing statement adment(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 add action was not required.	pted by the board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and s	shareholder
	XY 25, 2017	
DatedSignature	Dmato	
selecte	irector, president or other officer – if directors or officers l. l. by an incorporator – if in the hands of a receiver, trustee ed fiduciary by that fiduciary)	nave not been , or other court
	AMADO MONTORO GUILLEN	
	(Typed or printed name of person signing)	
	p	
	(Title of person signing)	