0180000 16923

(Re	questor's Name)	
(Ad	dress)	
, (Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: THM REMODELI	ING CORP	
DOCUMENT NUMB	D19000014022		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this may	tter to the following:	
	BARBARA A READ, EA		
-		Name of Contact Person	_
	DUNEDIN TAX AND ACC	OUNTING	
-		Firm/ Company	
	1224 COUNTY RD 1		
-		Address	
	DUNEDIN, FL 34698		
-		City/ State and Zip Code	
DUNE	EDINTAX@YAHOO.COM		V
<u></u>	E-mail address: (to be us	sed for future annual report n	otification)
For further information	concerning this matter, pleas	se call:	
BARBARA A READ,	EA	at (736-1242
Name of Contact Person		Area Cod	e & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depar	tment of State:
\$35 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)
Ame Divis P.O.	ing Address ndment Section ion of Corporations Box 6327 hassee, FL 32314	Division Clifton I 2661 Ex	address nent Section of Corporations Building recutive Center Circle asee, FL 32301

Articles of Amendment to Articles of Incorporation of

THM REMODELING CORP

(Name o	of Corporation as currently	filed with the Florida Dept.	of State)	
P18000016923	<u> </u>	<u> </u>	<u> </u>	
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation add	opts the following amends	ment(s) t
A. If amending name, enter the new na	me of the corporation:			
			The n	ew
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional corporat	rated" or the abbreviati tion name must contain t	on the
B. Enter new principal office address, Principal office address <u>MUST BE A S</u>				-
		-	ু <u>ধ্</u> রশ্র	-
C. Enter new mailing address, if appli			3 8	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			73	777
				- O
				_
D. If amending the registered agent an		ss in Florida, enter the nam	e of the	
new registered agent and/or the nev	· · · · · · · · · · · · · · · · · · ·			
Name of New Registered Agent	ANGELICA DINIZ			
	2144 23RD AVE N			
	(Florida stree	ı address)		
New Registered Office Address:	ST PETERSBURG		Florida 33713	
The Heggierea Office Huaress.	(City)	(Zip Code)	-
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligations	of the position	
22) House in appointment as regist	agom - i um jumium m	a.ia accept the conguitoris	oj nie positioni	
a.c. 1	•			
<u> </u>	aplico Diniz	gistered Agent, if changing		
_	Signature of New Re	gistered 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	PT	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				-
Add				
Remove				
2) Change				
Add				
Remove				
3)Change		_		
Add		•		
Remove				
4) Change				
Add			-	
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)		
			······································
		.	
		<u> </u>	
f an amendment provides for an excl	ange, reclassification, or c	ncellation of issued sh	iares,
provisions for implementing the ame (if not applicable, indicate N/A)	idment if not contained in	the amendment itself:	
(ly not applicable, maicule WA)			
			· · · · · · · · · · · · · · · · · · ·

	adoption:	, if other than the
date this document was signed.	DDH of cold	
Effective date if applicable:	PRIL 25, 2018	
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	,,	
	(voting group)	
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated O 4 /	25/2018 maplico Diniz	
Signature (morlico sinis	
(By a selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)	
	ANGELICA DINIZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	