P1800019227

(Ke	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	<u>#</u>
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PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Name	e)
(Dc	ocument Number)	
(5)	outhern rumber,	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COE	RPORATION:	FOMATIONS INC	
DOCUMENT N	UMBER: P180000196	127	
The enclosed Art	icles of Amendment and fee are su	bmitted for filing.	
Please return all o	correspondence concerning this mat	tter to the following:	
	JOSEPH HARRINGTON		
		Name of Contact Person	1
	SMOOTH TRANSFORMAT	TIONS INC.	
		Firm/ Company	
*	5034 DANIELL TERRACE		•
		Address	
	JACKSONVILLE FL 32210	l	
		City/ State and Zip Code	:
	JAXHOMEIMPROVEMENT@GI	MAII COM	
-	_	ed for future annual report	notification)
			,
For further inform	nation concerning this matter, pleas	e call:	
JOSEPH HARF	RINGTON	904 at (6541307
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a che	ck for the following amount made p	payable to the Florida Depa	rtment of State:
⊠ \$35 Filing Fe	e S43.75 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 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment Articles of Incorporation

SMOOTH TRANSFOMATIONS INC. (Name of Corporation as currently to the second of the sec	filed with the Florida	Dank of Close		
P18000019227	filed with the Florida	Dank of Cinka)		
		Dept. of State)		
(Document Number of C	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	lorida Profit Corporatio	on adopts the following	g amendn	nent(s) to
A. If amending name, enter the new name of the corporation:				
SMOOTH TRANSFORMATIONS INC.			The ne	
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered." "professional association." or the abbreviation "P., B. Enter new principal office address, if applicable:	o". A professional coi	corporated or the ac rporation name must o	bbreviatie contain II	on he
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			- A	- 4
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	•	5	
<u> </u>			.1.	jo Jo
			L'S :	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the	name of the		55
Name of New Registered Agent				
(Florida street	address)	·····		
New Registered Office Address:		Florida		
(C)	ity)	(Zip C	'ode)	

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.

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: <u>X</u> Change	<u>PT</u>	John De	<u>)e</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	<u>Sally Sr</u>	nith	
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				
TACHTO A C				

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
If an amendment provides for an excl	ange, reclassification, or cancellation of iss ndment if not contained in the amendment	sued shares, itself:
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption:, if other 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 date will not be listed document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(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 adopted by the board of directors without shareholder action and shareholder action was not required.
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
12/13/2018
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 court appointed fiduciary by that fiduciary)
JOSEPH HARRINGTON
(Typed or printed name of person signing)
OWNER
(Title of person signing)