P18000023396

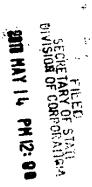
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COVER LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

, 100 €

28 HAY 14 PH 12: 81

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: E.R. HOME IMPR	OVEMENTS FLORIDA C	ORP		
DOCUMENT NUMB	ER: P18000023396				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	oondence concerning this man	ter to the following:			
]	ETHIENNE BENITEZ				
-	Name of Contact Person				
ı	E.R. HOME IMPROVEMENTS FLORIDA CORP				
-	Firm/ Company				
:	2529 W BUSCH BLVD SUITE 1000				
-	Address				
,	TAMPA, FL 33618				
-	City/ State and Zip Code				
ERHO	MEIMPROVEMENTSCOR	P@GMAIL.COM			
T The second		sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
ETHIENNE BENITEZ	:	at (813)		
Name o	f Contact Person	at (813)			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
■ \$35 Filing Fee	☐S43.75 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 Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address ment Section n of Corporations Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATION

2818 MAY 14. PM 12: 01

E.R. HOME IMPROVEMENTS FLORIDA CORP

(Name of Corporation	n as currently filed with the Flo	rida Dept. of State)
P18000023396		
(Docume	ent Number of Corporation (if kno	own)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corp	oration adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ac	"Inc," or "Co". A profession	
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	·)	The state of the s
5 Ie - 1 A -		
D. If amending the registered agent and/or registere new registered agent and/or the new registered of		er the name of the
Name of New Registered Agent		
Name of New Registered Agent		
	(Florida street address)	
	(,	
New Registered Office Address:	(City)	Florida (Zip Code)
	14-4/7	(1.1)
New Registered Agent's Signature, if changing Regis		
I hereby accept the appointment as registered agent. I	am familiar with and accept the i	obligations of the position.
Signat	ture of New Registered Agent, if c	hanging

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally Si	<u>nìth</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	D		ETHIENNE BENITEZ	2529 W BUSCH BLVD STE 1000
Add				TAMPA, FL 33618
X Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	 			
Add				
Remove				

made distriction officers it necessari	v). (Be specific)			
				
				
				···
			- 	
	· · · · · ·			
an amendment provides for an e	xchange, reclassific	<u>ation, or cancellatio</u>	n of issued shares,	
provisions for implementing the a (if not applicable, indicate N/A	mendment it not co	ntained in the amen	dment itself:	
(ij noi applicable, indicate WA	,			
			7.77	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
· ·		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were as by the shareholders was/were:	dopted by the shareholders. The number of votes cast for the amer sufficient for approval.	ndment(s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment	statement (s):
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
_	dopted by the board of directors without shareholder action and sh	areholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareh	older
05/07/20 Dated	18	
Signature	Achel Resals	
selec	director, president or other officer – if directors or officers have need, by an incorporator – if in the hands of a receiver, trustee, or of inted fiduciary by that fiduciary)	
	ALFRED ROSADO	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	