

(F	Requestor's Name)			
(A	Address)			
(Ā	Address)			
(0	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(E	Business Entity Name)			
(C	Document Number)			
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

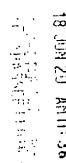
Office Use Only



600314720326

06/20/18--01008--009 **35.00

S TALLENT JUN 22 2018



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: _	365 R	ESTORATION	INC
DOCUMENT NUMBER:	P18	3000032 1	38
The enclosed Articles of Amendm	ent and fee are su	bmitted for filing.	
Please return all correspondence co	oncerning this mat	tter to the following:	
	Dav 165 10 NE	Name of Contact Person Restaration Firmi/Company 37 73 St	,
Day E-mail	Yompan Vid Pernaddress: (to be us	Address Peach City/ State and Zip Code City/ State and Zip Code City/ State and Zip Code City/ State and Zip Code	tmail.com
For further information concerning	this matter, pleas	se call:	
David Pe Name of Contact P	erson	at (<u>959</u> Area Co	de & Daytime Telephone Number
Enclosed is a check for the following	ng amount made p	payable to the Florida Depa	artment of State:
\$35 Filing Fee \$43. Certi	75 Filing Fee & ficate 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 See Division of Corp P.O. Box 6327	tion orations	Amend Divisio Clifton	Address Iment Section on of Corporations Building yeartive Center Circle

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

Articles of the	e e	
	of	
	ion Inc.	
(Name of Corporation as curren	itly filed with the Florida Dept. of State)	•
P1800 00 32	138	
1000	of Corporation (if known)	
(1.000.11.11.11.11.11.11.11.11.11.11.11.1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion, ", "company," or "incorporated" or "Co". A professional corporation name "P,A."	the abbreviation must contain the
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
C. D		m on
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		- Table 2011
•		(a)
		•
D. If amending the registered agent and/or registered office ad-		
new registered agent and/or the new registered office addre	- 70	
Name of New Registered Agent David	Pernici DE	P-18-501A
isa N Fo	deal Human	
<u>-/ // / / / / / / / / / / / / / / / / /</u>	street address)	
(r fortau s		72110
New Registered Office Address: 10110ano	Seach, Florida	20062
V	(City)	(Zip Code)
•		

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

P = President; V= Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones led	s, if neces irector til Presider = Chief er, Direct d in the fe aves the l	sary)	han one title, list the first letter of each office PST and Mike Jones is listed as the V. There is
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change Add	T	David Pernici	49 N Federal Her Pompano Beach, FL
Remove			
2) Change		<u> </u>	
Add			
Remove		•	
3) Change		·	
Add		;	
Remove			
4) Change			
Add			
Remove			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

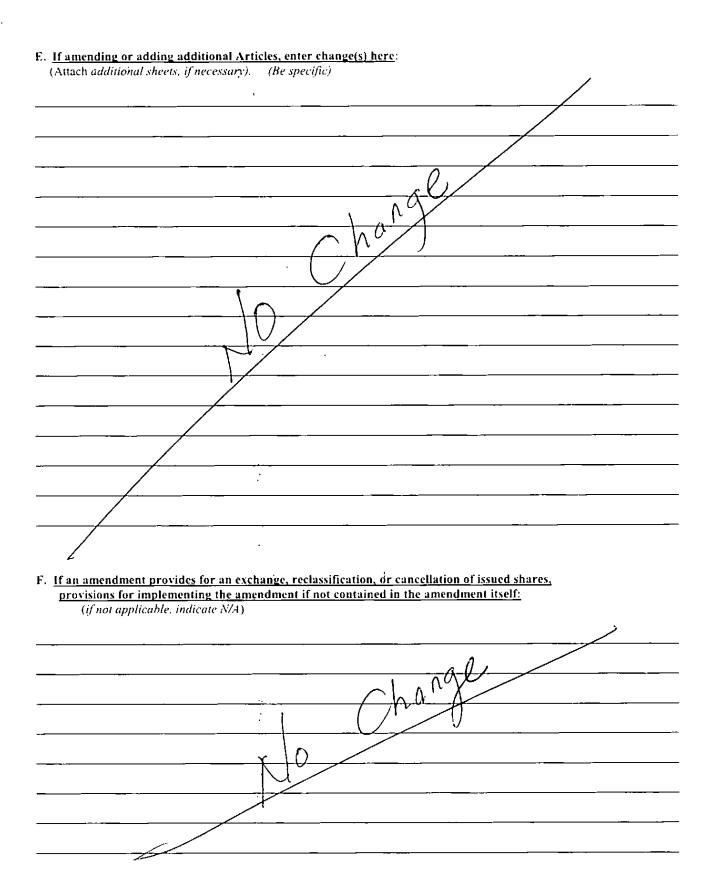
Change	 	
Add		
Remove	•	

5) ____ Change

____ Add

6)

____ Remove



The date of each amendment(s) adoption:	June	18,	2018	if other than the
date this document was signed.	T	_		
Effective date <u>if applicable</u> :	no more than 90 days a	18 <u></u>	2018	
· ·	no more may so aa/2 a	jier amenan	nem pile utile)	
Note: If the date inserted in this block does not document's effective date on the Department of St		tutory filing	requirements, this o	date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)			
The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	reholders. The number	r of votes ca	st for the amendmen	u(s)
☐ The amendment(s) was/were approved by the si must be separately provided for each voting gr				nent
"The number of votes east for the amendr	nent(s) was/were suffici	ent for appr	oval	
by			···	
(voting	g group)			
☐ The amendment(s) was/were adopted by the bo action was not required.	ard of directors without	shareholder	action and sharehol	der
☐ The amendment(s) was/were adopted by the incaction was not required.	corporators without shar	eholder acti	on and shareholder	
Dated_June	18,2018			
Signature DFE	along			
(By a director, preside	ent or other officer – if c			
selected, by an incorp appointed fiduciary by	orator – if in the hands (v that fiduciary)	of a receiver	r, trustee, or other co	urt
Da	avid E	rdhe	in	
(Τ <u>΄</u>	ped or printed name of	person sign	ing)	
	Preside	1	<u>.</u>	
	(Title of person	n signing)		