## P18000043328

(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name	e)
(Di	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to		
	J. HORNE	
	J. HORNE FEB 10 2022	
		2/4





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2022 FEB -4 AH 9: 18

## Attn: Jasmine horne @dos.my. Florida.com

## **COVER LETTER**

TO: Amendment Section Division of Corpor			Tro.
NAME OF CORPORA		Remodeling	Services, Coo.
DOCUMENT NUMBI	ER: PICCUL	1433aB	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	_
_	Barbara		Perez
_	Clamil E		Services, Inc
_	1835	Dorothy St	reet
	Lakela	and, Address'338	15-390
_		City/ State and Zip Code	3
_	Clamilren	ncueling & Gi	mail.com
	E-mail address: (to be to	sed for future administ report	notification)
For further information	concerning this matter, pleas	se call:	
Burbara	i Perez	at ( 843	310,9663
Name of	Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for t	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fcc & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ng Address		Address
	dment Section on of Corporations		ment Section n of Corporations
	on of Corporations  Sox 6327		entre of Tallahassee
	assee, FL 32314		Monroe Street, Suite 810

Tailahassee, FL 32303

## FILED

Articles of Amendment

to Articles of Incorporation 2022 FEB -4 AM 9: 18

SECRETARY OF STATE TALLAHASSES, FLOR

	FALLAHASSEE, FL
Clamil Remodeli	ng Services Inc.
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
DIEVERL	133QQ
(Document Number	of Corporation (if known)
·	
Pursuant to the provisions of section 607.1006, Florida Statutes, this articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
	1025 Dorothy Street
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	The last of the
(Principal office address MOST BE A STREET ADDRESS)	Lave land, FL:
	22011-3901
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1835 Dorothy Street
	Lakeland, FL.
	22(3)5-30
	35013 " 3901
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addres	555:
Burling la	es thins deser
Name of New Registered Agent	11 01 11
1000 Da	Othy Street
(Florida s	treet addreks)
New Registered Office Address: Lave (11)Cl	Florida_55916 -340 (
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	nt:
I hereby accept the appointment as prejistered agent. I am familiar	with and accept the obligations of the position.
(L)	
* Janhours	Lorgal
Signature of New	Pagistared Artificial if changing
Signature of New	Registered Ageny, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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 J	<u>20e</u>	
X Remove	<u>V Mike</u>	Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)  1) Change	Title PUES	Claritize Genzalez	2740 Taylor Rd.
Add Remove 2) Change Add	PRES	Barbara Ines Elias Paz	<u>Lakeland</u> , Fe.
Remove 3) Range Add	<del></del>		<u>33815</u> -390
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

tach additional sh	ling additional Arti neets, if necessary).	(Be specific)	e(s) nere.		
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an amendment n	rovides for an exch	ange, reclassific	ation, or cancella	tion of issued sh	ares,
rovisions for imp	lementing the ame	ndment if not co	ntained in the an	endment itself:	
(if not applicat	ole, indicate N/A)				
		<u></u>			
	– NIA	•			
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	<u> </u>				<del></del>

	NIA	,	
The date of each amendment(s) adopt	ion:		, if other than the
date this document was signed.			
	Nail agal		
Effective date if applicable:	(no more than 90 d	ays after amendment fil	e date)
	(NO INDIE BILLE SO W	<u> </u>	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable ment of State's records.	le statutory filing requi	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adopted action was not required.	Tby the incorporators, or boa	ard of directors without	shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The nuent for approval.	umber of votes cast for	the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting group entitled to vot	th voting groups. The fi te separately on the ame	ollowing statement indment(s):
The number of votes cast for the	he amendment(s) was/were s	sufficient for approval	
<b></b>			
by	(voting group)	· · · · · · · · · · · · · · · · · · ·	
Dared NON Signature Cla	ibel Longer, president or other officer	ulg if directors or officers	have not been
(Dy a uncode	an incorporator - if in the ha	ands of a receiver, truste	e, or other court
appointed fi	duciary by that fiduciary)		
$\mathcal{L}$	Varibel Go	174/82	
	(Typed or printed nan	ne of person signing)	
	Owener.	Dres.	
<del></del>	(Title of nerson signic	ne)	