## P180000 46203

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ΠΟΝ: MENDOZA REM	ODELING SERVICE COF	RP		
DOCUMENT NUMBER	R:P18000046203				
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ndence concerning this ma	tter to the following:			
	10	RGE LUIS MENDOZA ES	SCOBAR		
	Name of Contact Person				
	MENDOZA REMODELING SERVICE CORP				
<del></del> -	Firm/ Company				
	4394 NV	9TH AVE BUILDING 22	2.1A APT 349		
		Address			
	POMPAN	NO BEACH, FL 33064			
		City/ State and Zip Code	2		
	MENDOZA	REMODELINGSVC@GM	IAIL.COM		
-	E-mail address: (to be us	sed for future annual report	notification)		
For further information co	oncerning this matter, pleas	se call: 954	994-6233		
<del> </del>	Contact Person	at (	de & Daytime Telephone Number		
		payable to the Florida Depa			
■ \$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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address ment Section on of Corporations Building		
Tallaha	ssee, FL 32314	2661 E	xecutive Center Circle Issee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

MENDOZA REMODELING SERVICE CORP

/N	and the angel of the property of the second
	ly filed with the Florida Dept. of Stafe)
P18000046203	•
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	Muchini
N/A	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ' word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
	N/A
B. Enter new principal office address, if applicable:	1473
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A
,	
	-
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	<u>s:</u>
N/A Name of New Registered Agent	
(Florida e	reet address)
(Fibrida M	reet tuaress)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	<del></del>
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 I	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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	JAZMIN ESMERALDA TORREZ	4394 NW 9TH AVE BUILDING 2
X Add			POMPANO BEACH,FL 33064
Remove			<del> </del>
2) Change			
Add			<del>.</del> .
Remove			
3) Change			
Add			
Remove			
4) Change		<del></del>	-
Add			
Remove			· ·
5) Change			
Add			
Remove			
6) Change			
Add			<del></del>
Remove			

/A	s, if necessary).	(Be specific)			
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	N/A	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	/*	
Effective date <u>if applicable</u> :	/A	
	(no more than 90 days after amend	ment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes ca sufficient for approval.	ast for the amendment(s)
	approved by the shareholders through voting groups. For each voting group entitled to vote separately on t	
"The number of votes ca	ist for the amendment(s) was/were sufficient for app	roval
by	(voting group)	."
, <del></del>	(voting group)	<del></del>
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholde	r action and shareholder
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder act	ion and shareholder
10/08/20	119	
Dated		
Signature	SIDE MENTOZA	3
(By	director, president or other officer – if directors ok	
	ted, by an incorporator – if in the hands of a receive inted fiduciary by that fiduciary)	r, trustee, or other court
	JORGE LUIS MENDOZA ESCOBAR	
	(Typed or printed name of person sign	ning)
	PRESIDENT	
	(Title of person signing)	