PIECO 053 485

(Req	uestor's Name)	
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(City	/State/Zip/Phon	e #)
	WAIT	MAIL
(Busi	iness Entity Nar	ne)
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Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer;	
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TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: ______ OMEGA 1 REMODELING INC

DOCUMENT NUMBER: P18000053485

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TARAK SOLIMAN

Name of Contact Person

Firm/ Company

PO BOX 291582

Address

FORT LAUDERDALE, FE 33329

City/ State and Zip Code

OMEGAHOMEREMODELING@HOTMAIL.COM

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call-

TARAK SOLIMAN

Name of Contact Person

at (<u>954</u>) <u>512-0908</u> Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

🖬 - \$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 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations Chiton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

OMEGA 1 REMODELING INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P18000053485

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(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006. Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

name must be distinguishable and contain the word "corpora "Corp.," "lnc.," or Co. " or the designation "Corp." "lnc," of word "chartered," "professional association." or the abbreviation	"Co" A professional e			
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)				
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	/	N/A		2019 OCT -3 PH 6:35
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre		ie name of the		
Name of New Registered Agent	·			
(Florida	street address))A	····-	
<u>New Registered Office Address:</u>	(City)	, Florida	(Zip Coc	le)

Thereby 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 Y. 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, Y as Remove, and Sally Smith, SV as an Add. Example:

X_Change	$\overline{\mathrm{PT}}$	John Doe	
<u>X</u> Remove	\underline{V}	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3.) Change		- <u></u>	
Add		$\left \bigcirc \right \right $	
Remove		·	
4) Change			
Add			
Remove			
5) Change			
Add			·
Remove			
6) Change			
Add			
Remove			

1	. •	

E. <u>If amending or adding additional Articles, enter change(s) here</u>: (Attach *additional sheets, if necessary).* (Be specific)

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N7A)
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n + l
/-\- - - <u> </u> _
$^{\prime}$ V $^{\prime}$

The date of each amendment(s) ad date this document was signed.	option:	, if other than
Effective date <u>if applicable</u> :	10	11/19
· ·	tuo more b	han p 0 days after amendment file date)
Note: If the date inserted in this b. document's effective date on the Dep	ock does not meet the a partment of State's recor	applicable statutory filing requirements, this date will not be listed as ds.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was were ado by the shareholders was/were sut	nted by the shareholders ficient for approval.	The number of votes cast for the amendment(s)
The amendment(s) was/were approximation of the separately provided for a must be separately provided for a must be separately provided.	oved by the shareholder each voting group entitle	rs through voting groups. The following statement ed to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) wa	s/were sufficient for approval
by	(voluig group)	·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··
	(voting group)	
The amendment(s) was/were adop action was not required.	oted by the board of dire	ctors without shareholder action and shareholder
☐ The amendment(s) was/were adop action was not required.	sted by the incorporators	without shareholder action and shareholder
10/01/2019 Dated		
·///////		
Signature X	\rightarrow	SL.
ABya dir	ector, president or other	officer - if directors or officers have not been
	d fiduciary by that fiduc	in the hands of a receiver, trustee, or other court fary)
	TARAK SOLIMAN	
-	(Typed or prin	nted name of person signing)
1	RESIDENT	