## P18000083690

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2018 OCT 22 AM 8: 21 SECRETARY OF STAI

C. GOLDEN 0CT 2 6 2018

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	M & M Remodelin	g & Painting Family, Corp			
DOCUMENT NUMBER: _	P18000083690		<del></del>		
The enclosed Articles of Amo	endment and fee are su	bmitted for filing.			
Please return all corresponde	nce concerning this ma	tter to the following:			
	!	Karen Yolanda Milla			
	Name of Contact Person				
	Firm/ Company				
	18401 NW 22nd Avenue				
	Address				
	Miami Gardens, FL 33056				
	City/ State and Zip Code				
	sur	nbeam1800@hotmail.com			
E	-mail address: (to be us	sed for future annual report	notification)		
For further information conc	erning this matter, pleas	se call:			
Alberto Quinones		786 at (	539-6858		
Name of Con	tact Person	at (786 ) 539-6858  Area Code & Daytime Telephone Number			
Enclosed is a check for the fo	ollowing amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	l\$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 Tallahassec, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

M & M REMODELING & PAINTING FAMILY, CORP

2018 OCT 22 AM 8: 20

(Name of Corporation as curren	tly filed with the Florida	Dept. of State)
P18000083		SECRETARY OF STA TALLAHASSEE, FI
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporati	ion adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
M & M PAINTING FAMILY, CORP		The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional co	corporated" or the abbreviation
D. Carana and a formal office address of a palicular.	N/A	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable:	NT/ 4	
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
	- <del> </del>	
	·····	<del></del>
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		e name of the
N/A	<u> </u>	
Name of New Registered Agent		
	street address)	
New Registered Office Address: N/A	.21: 1	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen	nt:	
I hereby accept the appointment as registered agent. I am familia	r with and accept the oblig	ations of the position.
Signature of New	Registered Agent, if chang	ging

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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A 	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
<del></del>			
6) Change			
Add			
Remove			

E. Hame (Attach	ending or adding additional Art in additional sheets, if necessary).	(Be specific)		
N/A	•			
			<u></u>	
	<u> </u>			
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F. If an	amendment provides for an exc	hange, reclassification, or	cancellation of issued shar	es,
<u>prov</u>	isions for implementing the amount of the implementing the amount of the indicate N/A)	endment it not contained it	the amendment itself:	
N/A				
				<u>-</u>
			<del> </del>	<del> </del>
<del></del>				
		· · · · · · · · · · · · · · · · · · ·		
	•			

	OCTOBER 11, 2018	, if other than the
The date of each amendment(s) ac	loption:	, it other than the
date this document was signed.	OCTOBER 11, 2018	
Effective date if applicable:		
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requir partment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the fficient for approval.	ne amendment(s)
☐ The amendment(s) was/were appropriately provided for	proved by the shareholders through voting groups. The fore each voting group entitled to vote separately on the ame.	llowing statement ndment(s):
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
■ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action	
The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and	shareholder
Dated	R 10. 2018	
selecte	lirector, president or other officer – if directors or officers ed, by an incorporator – if in the hands of a receiver, truste ated fiduciary by that fiduciary)	
	KAREN Y. MILLA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	