To: Sunhiz EFax . 1/30/25, 1:43 PM

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LICENSES ETC INC Account Number : I20070000159 Phone : (239)777-1028 Fax Number : (877)275-3593

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COR AMND/RESTATE/CORRECT OR O/D RESIGN ALL CITY TECH SERVICE, INC

Certificate of Status	0
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<u>amendment</u>

Electronic Filing Menu Corporate Filing Menu

Help



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: ALL CITY TEC	CH SERVICE, INC			
DOCUMENT NUM	TRER:P18000084782	!			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	TODD BABBITT				
		Name of Contact Person	n		
	LICENSES, ETC., INC.				
		Firm/ Company			
	27911 CROWN LAKE BL	VD			
		Address	- , ,		
	BONITA SPRINGS, FL 34	135			
		City/ State and Zip Cod	e		
	SUPPORT@LICENSESET	FC.COM sed for future annual report	natification		
	E-mail address, (to be di	sed for titule amuai report	Homeanny		
For further informat	ion concerning this matter, plea	so call:			
101 miles amorran	ion concerning the matter, per	or cuit.		77 338 382	
TODD BABBITT		at (239) 777-1028		*
Name	e of Contact Person		de & Daytime Telephone Number		<u>}</u>
Englaced is a check	for the following amount made	navable to the Florida Den	artment of State:	- 88 86 86 86 86 86 86 86 86 86 86 86 86 8	24-6-
Bucksed is a check	tor the fortowing amount made	payable to the Clotten isep	arment or plate.	- KG 로 1	?!
X S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	2025 JAN 30 AKII: 47 SECRETARY OF STATE TALLAHASSEE, FL	
Ai Di P.	mendment Section ivision of Corporations O. Box 6327 illahassee, FL 32314	Ameno Divisio The C 2415 !	Address Iment Section on of Corporations fentre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

ALL C	ITY TECH SERVICE, IN	С	
(Name o	of Corporation as current	tly filed with the Fiorida Dept. of State)	
	P18000084782		
	(Document Number)	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
	-		The new
	Corp, " "Inc." or "Co".	'company," or "incorporated" or the abb. A professional corporation name must	reviation "Corp.,"
B. Enter new principal office address, if applicable: 7602 NW 168TH TERRACE		7602 NW 168TH TERRACE	
(Principal office address MUST BE A S		HIALEAH, FL 33015	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7602 NW 168TH TERRACE	
		HIALEAH, FL 33015	2025 SECF
D. If amending the registered agent ar new registered agent and/or the new Name of New Registered Agent			JAN 30 AHII: 47 RENARY OF STATE
<u>Name of New Registerea Agent</u>			FFA FI
	7602 NW 168TH TERR	ACE treet address)	—— THE -7
New Registered Office Address:	, -	, Florida, Florida	33015 (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	iered agent. I am familiar	·	·
	JU		
	Signature of New 1	Registered Agent, if changing	
Check if applicable The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11)) (e). 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)

_ Remove

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> <u>.</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
\underline{X} Add	<u>sv</u> .	Sally Smith		
Type of Action (Check One)	Title	Name	Address	
1) X Change	Р	ALARCON, PABLO	7602 NW 168TH TERRACE	
Add			HIALEAH, FL 33015	<u>-</u>
Remove				
2) X Change	MGR	BRADFORD, JUSTIN	7602 NW 168TH TERRACE	_
Add			HIALEAH, FL 33015	_
Remove 3)Change			SEC	2025
Add				JAN 30
Remove			# <u>************************************</u>	Long
4) Change			SSET S	 三
Add			FILTE	11: H
Remove				
5) Change				_
Add				_
Remove				•
6) Change				-
Add				_

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
		
		
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	SEC:	
	PALL	
		1
	HAS	
	.,,	
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 N/A)	ANTI: 47 OF STATE SEE, FL	***
	TE 17	

The date of each amendn	ent(s) adoption:	, if other than the
date this document was sig	ned.	
Effective date <u>if applicabl</u>	e:	
	(no more than 90 days after amenament fue date)	
	in this block does not meet the applicable statutory filing requirements, this date in the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
X The amendment(s) was/ action was not required.	were adopted by the incorporators, or board of directors without shareholder action	n and shareholder
	were adopted by the shareholders. The number of votes cast for the amendment(s)/were sufficient for approval.)
	were approved by the shareholders through voting groups. The following statemer elded for each voting group entitled to vote separately on the amendment(s):	nt
"The number of ve	otes cast for the amendment(s) was/were sufficient for approval	
by	,,	
	(voting group)	S 2
Dated	01/28/2025	PECRETTALLA
Signature	JM.	HAS
o.g	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	F FELD 2025 JAN 30 AM II: 47 SECRETARY OF STATE TALLAHASSEE, FL
	PABLO ALARCON	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	