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| Certified Copies        | _ Certificates    | of Status |
| Special Instructions to | Filing Officer:   |           |
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TO: Amendment Section

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**Division of Corporations** 

## NAME OF CORPORATION: BIOHOME RESTORATIONS CORP

DOCUMENT NUMBER: P18000087096

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

Please return all correspondence concerning this matter to the following:

YENNY CAROLINA KIBBE SAYEK

Name of Contact Person

BIOHOME RESTORATIONS CORP

Firm/ Company

1550 TILESTON RD UNIT 105

Address

ST CLOUD, FL 34771

City/ State and Zip Code

INFO@BIOHOMERESTORATIONS.COM

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

For further information concerning this matter, please call:

| OSMAN ALEXIS DE         | LGADO TABOSKY                                  | 407<br>at (   | 5930188  |              | 53        |                |
|-------------------------|--|---|--|--------------|-----------|----------------|
| Name o                  | of Contact Person                              | Area Co   | de & Daytime Telephone Numb  | per <u> </u> | نې<br>س   |                |
| Enclosed is a check for | the following amount made                      | payable to the Florida Dep  | artment of State:  |              | 21        |                |
| S35 Filing Fee          | □\$43.75 Filing Fee &<br>Certificate of Status | S43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | S52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) | TATE         | P:112: 13 | ا ۵ م<br>سعیوب |
|                         | ling Address<br>ndment Section                 |   | Address<br>Iment Section   |              |           |                |
|                         | sion of Corporations                           |   | on of Corporations   |              |           |                |

P.O. Box 6327 Tallahassee, FL 32314

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Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of

BIOHOME RESTORATIONS CORP

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

P18000087096

(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:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

#### B. Enter new principal office address, if applicable: (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>)

| D. <u>If amending the registered agent ar</u><br>new registered agent and/or the new | id/or registered office address in Florida, enter the name of<br>v registered office address: | the TALL            | ાપ્ડ દાગે | - |
|--|---|---------------------|-----------|---|
| Name of New Registered Agent   | YENNY CAROLINA KIBBE SAYEK  | ·                   | r.)       |   |
|  | 1550 TILESTON RD UNIT 105   |                     | 4         | • |
|  | (Florida street address)  |                     | 12        |   |
| <u>New Registered Office Address</u> :   | ST CLOUD, Flor  | ida <u>34771 끄칠</u> |           |   |
|  | (City)  | (Zip Code)          |           |   |

#### 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.

of New Registered Agent, if changing Signaty

#### Check if applicable

亡 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)

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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:

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| <u>X</u> Change                      | <u>PT</u>    | John Doe                     |                           |
|--------------------------------------|--------------|------------------------------|---------------------------|
| <u>X</u> Remove                      | Y            | Mike Jones                   |                           |
| <u>X</u> Add                         | <u>SV</u>    | Sally Smith                  |                           |
| <u>Type of Action</u><br>(Check One) | <u>Title</u> | Name                         | Address                   |
| 1) Change                            | Р            | Osman Alexis Delgado Tabosky | 1550 Tileston Rd Unit 105 |
| Add                                  |              |                              | St CLoud, FL 34771        |
| X Remove                             |              |                              |                           |
| 2) Change                            | <u>Р</u>     | Yenny Carolina Kibbe Sayek   | 1550 Tileston Rd Unit 105 |
| X Add                                |              |                              | St Cloud, FL 34771        |
| 3) Remove                            |              |                              |                           |
| Add                                  |              |                              | SEC                       |
| Remove                               |              |                              |                           |
| 4) Change                            |              |                              | EH IZ                     |
| Add                                  |              |                              | <u> </u>                  |
| Remove                               |              |                              |                           |
| 51 Change                            |              | _                            |                           |
| Add                                  |              |                              |                           |
| Remove                               |              |                              |                           |
| 6) Change                            | <u></u>      |                              |                           |
| Add                                  |              |                              |                           |
| Remove                               |              |                              |                           |
|                                      |              |                              |                           |

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|  | E. | If amending | or adding | additional Articles | s, enter change(s) here: |
|--|----|-------------|-----------|---------------------|--------------------------|
|--|----|-------------|-----------|---------------------|--------------------------|

(Attach additional sheets, if necessary). (Be specific)

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|   | 12                                    |
|   | SECRETA                               |
|   |                                       |
| 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)   |                                       |
| (if not applicable, indicate N/A)   | i I I                                 |
| (if not applicable, indicate N/A)   | PHI N                                 |
| (if not applicable, indicate N/A)   | F F                                   |
| (if not applicable, indicate N/A)   | - 22                                  |
| (if not applicable, indicate N/A)   | FILE L3                               |
| (if not applicable, indicate N/A)   |                                       |

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_

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(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

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(CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(\$):

"The number of votes cast for the amendment(s) was/were sufficient for approval

| (voting group)<br>07/11/2023<br>Dated<br>Signature<br>(By a director, president or other officer - if directors or officers have not been<br>selected, by an incorporator - if in the hands of a receiver, trustee, or other court<br>appointed fiduciary by that fiduciary)<br>OSMAN ALEXIS DELGADO TABOSKY<br>(Typed or printed name of person signing)<br>PRESIDENT<br>(Title of person signing) |   |          |                 |
|---|---|----------|-----------------|
|   | (voting group)                            |          |                 |
|   |   |          |                 |
|   | 7/11/2023                                 |          |                 |
| Dated_  |   |          |                 |
|   | COA                                       |          |                 |
| Signati   |   |          |                 |
|   |   | (D       | 26              |
|   |   | 15       | r<br>r<br>r     |
|   | appointed induciary by that induciary)    | 25       | بحل             |
|   | OSMAN ALEXIS DELGADO TABOSKY              |          |                 |
|   |   |          | $\underline{N}$ |
|   | (Typed or printed name of person signing) |          | -13             |
|   | PRESIDENT                                 |          |                 |
|   |   | 2.0      | 12              |
|   | (Title of person signing)                 | <u>s</u> |                 |
|   |   |          | i (L)<br>1      |