P18000088771

(Reque	estor's Name))
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phor	ne #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Na	me)
(Docui	ment Number	·)
Certified Copies	Certificate	es of Status
Special Instructions to Fili	ng Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LUXURY HOME	PRO CORP.	
	BER: P18000088771		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	ANDRES A. GONZALEZ		
		Name of Contact Person	1
	LUXURY HOME PRO COR	₹P.	
		Firm/ Company	
	845 NW 2ND ST		
		Address	
	FLORIDA CITY FL 33034		
		City/ State and Zip Cod	e
luvun	yhomepro.corp@gmail.com		,
- idxdry		sed for future annual report	
	E-mail address. (to be di	seu for future amuar report	notification)
For further information	n concerning this matter, pleas	se call:	
ANDRES A. GONZA	LEZ	at (779-2402
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
Ame Divi	ling Address endment Section sion of Corporations Box 6327	Ameno Divisio	Address Iment Section on of Corporations Building
	ahassee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LUAUN I DUNIE ENV CONT	E PRO COR	EP	ON	/ H	JR۱	Χl	LU	I
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(Name of Corporation as curren	tly filed with the Florida	Dept. of State)		
P18000088771				
(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	amendme	:nt(s)
A. If amending name, enter the new name of the corporation:				
SOUTH PRO 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		breviation	ı
B. Enter new principal office address, if applicable:	N/A	fe l		
(Principal office address MUST BE A STREET ADDRESS)				
		· ·	<u> </u>	
		, সু	<u></u>	
			<u> </u>	5
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	. :	্কৈ "	
,		-:	٥.	
D. If amending the registered agent and/or registered office ad		e name of the		
new registered agent and/or the new registered office addre	<u>ss:</u>			
Name of New Registered Agent N/A				
(Florida s	treet address)			
New Registered Office Address:		. Florida		
	(City)	(Zip C	ode)	
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familian	ut:	` ,	ine	

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:	r, ana sai	iy smun, .	зу аз ин маа.	
X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<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				
6) Change		-		
Add				
Remove				

(Attach	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
N/A	
,	
•—	
. <u>If an a</u>	mendment proyides for an exchange, reclassification, or cancellation of issued shares,
<u>provi</u>	sions for implementing the amendment if not contained in the amendment itself: if not applicable, indicate N/A)
V/A	,
<u> </u>	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(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 v document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ 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(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
02/27/2019	
Signature Signature	
(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)	
appointed inductary by that inductary)	
ANDRES A. GONZALEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	