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TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: NAPLES FRAMIN	G AND DRYWALL INC	
DOCUMENT NUM	IBER: P18000093711		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all cort	espondence concerning this ma	tter to the following:	
	ALEXIS GARCIA		
		Name of Contact Person	1
		Firm/ Company	
	281 11TH ST NW		
		Address	
	NAPLES, FL 34120		
		City/ State and Zip Cod	c
FPS	ERVICESNAPLES@GMAIL.	СОМ	
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	on concerning this matter, pleas	se call:	
ALEXIS GARCIA		at (²³⁹	285-6353
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 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		Amend Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

NAPLES FRAMING AND DRYWALL INC

(rtanie o	Corporation as curren	tly filed with the Florida Der	or state)
P18000093711			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation 2	adopts the following a
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and cont	tain the word "cornerat	ion " "company " or "incorr	orated" or the white
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa.	ation "Corp," "Inc," or	"Co". A professional corpor	ration name must con
B. Enter new principal office address,	if applicable:	281 11TH ST NW	
(Principal office address MUST BE A STREET ADDRESS)		NAPLES, FL 34120	
			IAL.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		281 11TH ST NW	
		NAPLES, FL 34120	
			ر ا
D. If amending the registered agent an new registered agent and/or the new			me of the
Name of New Registered Agent	YAMILA CESAR COR		
<u>Name of New Registerea Agent</u>	13686 LEGACY LN		
	(Florida	street address)	
New Registered Office Address:	NAPLES		, Florida 34114
New Registered Office Address.	(City)		Zip Goo

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V = Vice to Executive Officer; CFO = held. President, Treasure. Changes should be noted	ind/or D if necess rector titl President = Chief I r, Director in the for	irector b lary) le by the fi l; T= Tree linancial lor would l llowing m orporatio	irst letter of the office title: asurer; S= Secretary; D= Director; TR= To Officer. If an officer/director holds more be PTD. anner. Currently John Doe is listed as the n, Sally Smith is named the V and S. These	Frustee; C = Chairman or Clerk, than one title, list the first letter PST and Mike Jones is listed as		
X Change	<u>PT</u>	John Do	<u>oe</u>			
X Remove	<u>V</u>	Mike Jo	Mike Jones			
X Add	<u>sv</u>	Sally Sr	mith_			
Type of Action (Check One)	Title		Name	Address		
1) Change	P		CARLOS ALBERTO HERNANDEZ	1936 48TH ST SW		
Add	-	_		NAPLES, FL 34116		
X Remove						
2) Change	P		YAMILA CESAR CORRALES	13686 LEGACY LN		
X				NAPLES, FL 34114		
Remove						
3) Change		_				
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						
			Page 2 of 4			

Attach additional sheets, if necessary).	(Be specific)	
		<u> </u>
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		-
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		-
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,	
provisions for implementing the am (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
(ij noi applicable, indicate tox)		\
		<u>-</u>

	10/03/2019	
The date of each amendment(s) adoption date this document was signed.		, 1
10/03/2019		
Effective date if applicable:		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departme	oes not meet the applicable statutory filing requirements, this date wilnt of State's records.	ll not t
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes east for the amendment(s) to for approval.	
☐ The amendment(s) was/were approved must be separately provided for each v	by the shareholders through voting groups. The following statement of other 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 b action was not required.	y the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted b action was not required.	y the incorporators without shareholder action and shareholder	
10/03/2019 Dated		
Signature	in the second se	
selected, by a	, president or other officer – if directors or officers have not been n incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)	
ALEX	CIS GARCIA	
	(Typed or printed name of person signing)	
PRES	IDENT	
	(Title of person signing)	