Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN REBELLO SERVICE CORP

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

•		بر م
	Articles of Amendment	Macanasasa
	to Articles of Incorporation	H20000335169
	of	27 1 12: 14
REBELLO SERVICE CORP		
(Name o	of Corporation as currently filed with t	he Florida Dept. of State)
P18000103147		
	(Document Number of Corporation	(ifknown)
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006. Florida Statutes, this <i>Florida Profi</i>	t Corporation adopts the following amendment(
A. If amending name, enter the new na	me of the corporation:	
BLUESKY GENERAL SERVICES COI	₹P	The new
come must be distinguishable and contain	the word "corporation " "company " or	"incorporated" or the abbreviation "Corp.,"
Inc.," or Co.," or the designation "C	orp," "Inc," or "Co". A professiona	l corporation name must contain the word
'chartered," "professional association,"	or the abbreviation "P.A."	
8. Enter new principal office address,	if applicable:	
Principal office address MUST BE A S		
		
C. Enter new mailing address, if appli		
(Mailing address <u>MAY BE A POST</u>)	OFFICE BOX)	
). If amending the registered agent an	d/or registered office address in Florid	a, enter the name of the
new registered agent and/or the nev		
N 64 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	N/A	
Name of New Registered Agent	·	
		<u> </u>
	(Florida street address)	
New Registered Office Address:	N/A	, Florida
The Management Office Films	(Cip)	(Zip Code)
New Registered Agent's Signature, if cl	hanging Registered Agent:	
	ered agent. I am familiar with and acce	pt the obligations of the position.

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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 officerklirector 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>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	REBELLO, THUANA D	733 SE IST WAY
Add			DEERFIELD BEACH, FL 33441
X Remove			
2) Change	VP	LUIZ FELIPE M. MARQUES	733 SE IST WAY
X Add			DEERFIELD BEACH, FL 33441
Remove 3) Change			
Add			
Remove			
4) Change		_	_
Add			
Remove			
5/ Change			
Add			
Remove			
6) Change			
Add			
Remove			

F. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	H20000335169 3	
N/A		
N/A		
		
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F. 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)		
N/A		
		
		

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	09/25/2020	
The date of each ar date this document v	nendment(s) adoption:vas signed.	, if other than the
Effective date if app	plicable:	
	(no more than 90 days after amendment file date)	
	serted in this block does not meet the applicable statutory filing requirements, the date on the Department of State's records.	is date will not be listed as th
Adoption of Amend	dment(s) (CHECK ONE)	
The amendment(s action was not re-	s) was/were adopted by the incorporators, or board of directors without shareholder quired.	action and shareholder
	s) was/were adopted by the shareholders. The number of votes cast for the amendrers was/were sufficient for approval.	nent(s)
	s) was/were approved by the shareholders through voting groups. The following surely provided for each voting group entitled to vote separately on the amendment(s).	
"The numb	er of votes cast for the amendment(s) was/were sufficient for approval	
by	,,,	
· , 	(voting group)	
	09/25/2020	
D:	09/23/2020 ated	
Si	gnature #	
	(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – it in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
	MARCUS FABIO S BASTOS REBELLO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·