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COVER LETTER

TO: Amendment Section
Division of Corporations

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NAME OF CORE	ORATION: AJC INSTALLATI	ION & CONS	TRUCTION	CORP
	MBER: P19000003898			·
	les of Amendment and fee are sul	bmitted for fill	ing.	
Please return all co	rrespondence concerning this mat	tter to the follo	owing:	
	LUIS R. SMITH			
		Name of C	ontact Person	
	TAXES USA LLC			
	<u> </u>	Firm/ (Company	
	5892 STIRLING RD # 4			
		Ad	dress	
	HOLLYWOOD, FL 33021			
		City/ State	and Zip Code	-
	INFO@TAXESUSAMIAMI.	.СОМ		
	E-mail address: (to be us		innual report	notification)
For further informately Rules R. SMITH	ation concerning this matter, pleas	se call:	,305	470-2429
Nar	ne of Contact Person	at	Area Co	de & Daytime Telephone Number
Enclosed is a check	k for the following amount made	payable to the		•
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 F Certified (Additional enclosed)	l copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
[F	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314		Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

AJC INSTALLATION & CONSTRUCTION CORP

(Name of Corporation as currently	filed with the Florida Dept. of State)
19000003898	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F ts Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
3. Enter new principal office address, if applicable:	26
Principal office address MUST BE A STREET ADDRESS)	76 Ja DE
	7
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	=======================================
muning undress MAT BE A TOBY OF THE BON	Fil 9: 29
	<u> </u>
). If amending the registered agent and/or registered office address	
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida

Check if applicable

[☐] The amendment(s) is/are being filed pursuant 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)

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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	MARIA D. VIVAS	8225 NW 116TH AVE
Add			DORAL, FL 33178
X Remove			
2) Change	VP	JENNYFER ANGARITA VIVAS	8225 NW 116TH AVE
X Add			DORAL, FL 33178
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			·
Add			
Remove			

Attach add	ng or adding addit ditional sheets, if ne	cessary). (Be s	specific)			
			<u> </u>			· · · · · · · · ·
				-		
-		•				
provision	ndment provides f as for implementin of applicable, indica	ig the amendme	reclassification nt if not contain	n, or cancellation ned in the amer	n of issued share idment itself:	<u>25,</u>
						
						
						
				<u>. </u>		

The date of each amendment(s) ac	loption:	, 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 blocument's effective date on the De	ock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sharehole	der action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amen	ndment(s)
must be separately provided for	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment (for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	
12/08/2020		
Dated		
g:		
Signature(By a di	rector, president or other officer - if directors or officers have no	et been
selected	, by an incorporator - if in the hands of a receiver, trustee, or oth	
appointe	ed fiduciary by that fiduciary)	
:	IOSE D. ANGARITA	
-	(Typed or printed name of person signing)	
1	PRESIDENT /	
-	(Title of person signing)	