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| (Red | questor's Name) | |
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| Certified Copies | Certificate: | s of Status |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: | BERLIN REPAI | RS & RESURFA | CING, CO | ORP | | |
|--|-------------------------------------|---|------------------------------|--|--|--|
| DOCUMENT NUMBER: | P1 | 9000006996 | | | | |
| The enclosed Articles of Amenda | nent and fee are su | bmitted for filing | | | | |
| Please return all correspondence | concerning this ma | tter to the follow | ng: | | | |
| | ВЕ | ERLIN I. ZAMBE | RANO NU | NEZ | | |
| | | Name of Con | tact Person | 1 | | |
| | BERLIN REPAIRS & RESURFACING, CORP | | | | | |
| | Firm/ Company | | | | | |
| 333 LAU | JRINA STREET, A | APT. # 514 | | | | |
| | | Addr | ess | _ | | |
| JACKSO | NVILLE. FLORI | DA 32216 | | | | |
| | | City/ State an | d Zip Cod | 2 | | |
| | ZAMB | RANOBERLIN8 | @GMAIL | COM | | |
| E-ma | l address: (to be u | sed for future ann | ual report | notification) | | |
| For further information concerning | g this matter, pleas | se call: | | | | |
| BERLIN I. ZAMBRA | NO NUNEZ | at (| 904 | | | |
| Name of Contact | Person | <u> </u> | Area Co | de & Daytime Telephone Number | | |
| Enclosed is a check for the follow | ring amount made | payable to the Flo | orida Depa | artment of State: | | |
| _ | .75 Filing Fee & tificate of Status | S43.75 Filin Certified Co (Additional of enclosed) | ру | ☐\$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, FŁ 32314 | | | Amenc Division Clifton | Address Iment Section on of Corporations Building Executive Center Circle | | |

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

BERLIN REPAIRS & RESURFACTION CORP.

| (Name of Corporation as curren | tly filed with the Florida Dept. of State) | | |
|--|---|--|--|
| | 000695 NOA -8 V N. 371 | | |
| (Document Number | of Corporation fif known) STATE TALLAHASSEE, FLORIDA | | |
| Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation: | s Florida Profit Corporation adopts the following amendment(s) to | | |
| A. If amending name, enter the new name of the corporation: | | | |
| | The new | | |
| name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the | | |
| B. Enter new principal office address, if applicable: | 333 LAURINA STREET, APT. # 514 | | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | JACKSONVILLE, FLORIDA 32216 | | |
| | | | |
| | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 333 LAURINA STREET, APT, # 514 | | |
| The state of the s | JACKSONVILLE, FLORIDA 32216 | | |
| | | | |
| The state of the s | Idama in Florida, ontar the name of the | | |
| D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address. | ess: | | |
| Name of New Registered Agent | | | |
| Same of the Management of the Control of the Contro | | | |
| (Florida : | street address) | | |
| New Registered Office Address: Florida | | | |
| . Contraga Copper Total | (City) (Zip Code) | | |
| | | | |
| N. D. C. L. L. W. W. L. L. W. Branch & Brains Devictored Age | n.*. | | |
| New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia | nt. r with and accept the obligations of the position. | | |
| | | | |
| | | | |
| Signature of New | s Registered Agent, if changing | | |

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 Doc | |
|-------------------------------|-----------------|--------------------------|------------------------|
| X Remove | \underline{V} | 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 | P | ELSI I. ORDONEZ | 333 LAURINA STREET |
| Add | | | APT. # 115 |
| X Remove | | | JACKSONVILLE, FL 32216 |
| 2) X Change | P | BERLIN I. ZAMBRANO NUNEZ | 333 LAURINA STREET |
| Add | | | APT, # 514 |
| Remove | | | JACKSONVILLE, FL 32216 |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | _ |
| Remove | | | |

| Ataen aaattional St | ding additional Art heets, if necessary). | (Be specific) | | | | |
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| an amendment r | provides for an exc | hange, reclassifi | cation, or cancel | lation of issued sh | ares, | |
| provisions <u>for im</u> | plementing the ame | endment if not c | ontained in the a | mendment itself: | | |
| (if not applica | ible, indicate N/A) | | | | | |
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| | NOVEMBER, 5TH 2019 | |
|---|--|-----------------------------|
| The date of each amendment(s) ac | option: | , if other than the |
| date this document was signed. | | |
| | NOVEMBER, 5TH 2019 | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| | • • | |
| Note: If the date inserted in this b document's effective date on the De | lock does not meet the applicable statutory filing requirements, this date partment of State's records. | e will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval. | |
| ☐ The amendment(s) was/were app must be separately provided for | roved by the shareholders through voting groups. The following statemen each voting group entitled to vote separately on the amendment(s): | n |
| | for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| <u> </u> | (voting group) | |
| action was not required. | pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder | |
| action was not required. | | |
| | VEMBER, 5TH 2019 | |
| Dated | · · · · · · · · · · · · · · · · · · · | |
| 80 | Xlin Zombrano | |
| (By a d selecte | irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary) | |
| | BERLIN I. ZAMBRANO NUNEZ | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | . |

NOVEMBER, 5TH 2019