

Division of Corporations

*Re send
01/14/2020* Page 1 of 2

P190000011070

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CONSTRUCTION & ENGINEERING SCHOOL INC.
Account Number : I20170000070
Phone : (305) 226-8727
Fax Number : (305) 226-8767

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

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
PERUVIAN REMODELING CONSTRUCTION SERVICE, INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

SECRETARY OF STATE
TALLADEMA, FLORIDA

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850-817-6381

1/15/2020 11:59:00 AM PAGE 1/001 Fax Server



January 15, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations
CONSTRUCTION & ENGINEERING SCHOOL INC

SUBJECT: PERUVIAN REMODELING CONSTRUCTION SERVICE, INC
REF: P19000011070

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If you have any further questions concerning your document, please call (850) 245-6050.

Terri J Schroeder
Regulatory Specialist III
Amendment Section
Amount charged: 35.00

FAX Aud. #: H20000005652
Letter Number: 920A00001120

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Peruvian Remodeling Construction Service Inc

DOCUMENT NUMBER: P19000011070

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lucia Estralla

Name of Contact Person

Construction & Engineering School Inc

Firm/ Company

8300 W Flagler St Suite 114

Address

Miami, FL 33144

City/ State and Zip Code

luciaestrella@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lucia Estrella

at (305)

226-8727

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

Peruvian Remodeling Construction Service Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P19000011070

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

JR Medina Group Inc. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable;
(Principal office address MUST BE A STREET ADDRESS)

9010 SW 77 Ave Apt G4

Miami, FL 33156

C. Enter new mailing address, if applicable;
(Mailing address MAY BE A POST OFFICE BOX)

9010 SW 77 Ave Apt G4

Miami, FL 33156

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Juan R Chavez Medina

(Florida street address)


New Registered Office Address: 9010 SW 77 Ave Apt G4, Miami

(City)

Florida 33156
(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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

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 TALLAHASSEE, FLORIDA

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:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☒ Change

PT

Juan R Chavez Medina

90101 SW 7th Ave Apt G4

☐ Add

Miami, Fl 33156

☐ Remove

2) ☐ Change

☐ Add

☐ Remove

3) ☐ Change

☐ Add

☐ Remove

4) ☐ Change

☐ Add

☐ Remove

5) ☐ Change

☐ Add

☐ Remove

6) ☐ Change

☐ Add

☐ Remove

Page 2 of 4

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

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STATE OF FLORIDA
ALL APPLICANTS TO BE FILED

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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The date of each amendment(s) adoption: December 30th, 2019, if other than the date this document was signed.

Effective date if applicable: December 30th, 2019
(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 will not be listed as the document's effective date on the Department of State's records.

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

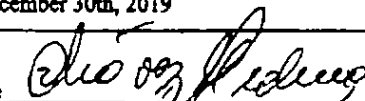
by _____."
(voting group)

☐ 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.

Dated December 30th, 2019

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)

Juan R Chavez Medina

(Typed or printed name of person signing)

President

(Title of person signing)

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TALLAHASSEE, FLORIDA

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