

17-Jan-2023 20:29

S. Llanio Business Service Inc

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1/17/23, 8:23 PM

Division of Corporations

P19000013280

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : S.LLANIO BUSINESS SERVICES INC

Account Number : I2020000011

Phone : (239)542-9104

Fax Number : (239)540-1760

\*\*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  
STYLES KITCHEN CABINETS INC

Certificate of Status	0
Certified Copy	0
Page Count	4
Estimated Charge	\$35.00

2023 JAN 18 AM 10:54  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

2023 JAN 18 AM 10:52

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Corporate Filing Menu

Help

af 1/19/2023

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Articles of Amendment  
to  
Articles of Incorporation  
of

STYLES KITCHEN CABINETS INC

FILED

2023 JAN 18 AM 10: 5

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

P19000013280

SECRETARY OF STATE  
TALLAHASSEE, FL

(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:

*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)

1939 DEL PRADO BLVD S UNIT D

CAPE CORAL, FL 33990

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

1939 DEL PRADO BLVD S UNIT D

CAPE CORAL, FL 33990

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 VICTOR A. CARRILLO

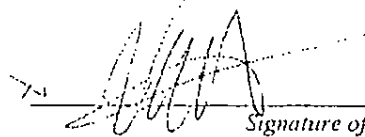
1939 DEL PRADO BLVD S UNIT D

(Florida street address)

New Registered Office Address: CAPE CORAL, Florida 33990  
(City) (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

Check if applicable

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

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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 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) <input type="checkbox"/> Change	<u>VP</u>	<u>CRISTOL ELIZABETH WALSH</u>	<u>186 PRICE ST</u>
<input type="checkbox"/> Add			<u>NAPLES, FL 34113</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>VP</u>	<u>VICTOR A. CARRILLO</u>	<u>1939 DEL PRADO BLVD S</u>
<input checked="" type="checkbox"/> Add			<u>UNIT D</u>
<input type="checkbox"/> Remove			<u>CAPE CORAL, FL 33990</u>
3) <input checked="" type="checkbox"/> Change	<u>P</u>	<u>JOSE RENSO, TORO FERNANDEZ</u>	<u>1939 DEL PRADO BLVD S</u>
<input type="checkbox"/> Add			<u>UNIT D</u>
<input type="checkbox"/> Remove			<u>CAPE CORAL, FL 33990</u>
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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

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

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)

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11/03/2022

The date of each amendment(s) adoption:  
date this document was signed.

... if other than the

Effective date if applicable:

(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 incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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)

Dated 11/03/2022

Signature [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)

VICTOR A CARRILLO

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)