P19 0000 27380

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

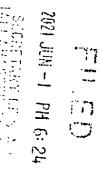
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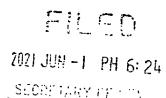
COVER LETTER -

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: JJ REMODELING	G & POUNCHOUT CORP	
	BER: P19000027380		
The enclosed Articles	of Amendment and fee are su	abmitted for filling.	
Please return all corre	spondence concerning this ma	atter to the following:	
	JONY COTO		
		Name of Contact Perso	n
		Firm/ Company	
	1175 NW 107TH ST		
	MIAMI FL 33168	Address	
		City/ State and Zip Cod	ic
For further informatio	n concerning this matter, plea	sed for future annual report	notification)
·-·		at () de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment of State;
S35 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			Address Iment Section
Division of Corporations		Division of Corporations	
	Box 6327		entre of Tallahassec N. Monroe Street, Suite 810
Tallahassee, Fl. 32314 2415 N. Monroe Street.			v. momoe sueci. Suite 810

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of



JJ REMODELING & POUNCHOUT CORP

(Nama of Carnavation as austrant)		
(Frame of Corporation as current)	y filed with the Florida Dept. of State)	
219000027380		
(Document Number of	f Corporation (if known)	<u> </u>
ursuant to the provisions of section 607,1006, Florida Statutes, this as Articles of Incorporation:	Florida Profit Corporation adopts the following	; amendment(s)
. If amending name, enter the new name of the corporation:		
CS CONSTRUCTION CORP		The
ame must be distinguishable and contain the word "corporation," "c lnc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered. "professional association," or the abbreviation "PA"	ompany," or "incorporated" or the abbreviation of the professional corporation name must contain	
. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>)		
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered office address:		
Name of New Registered Agent		
(Florida stre	vet address)	
New Registered Office Address:	vet 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	Ÿ	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

LAMach additional chapte, it magaceans	ticles, enter change(ş) here: (Re sparific)
(Attach additional sheets, if necessary).	(be specific)
	· · · · · · · · · · · · · · · · · · ·
	
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	·
f un amendment provides for an each	hange, reclassification, or cancellation of issued shares,
provision, for implementing the area	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nament it not contained in the amendment itself:
(у погаррисаоте, таксате мя)	

	03/10/2020	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	/10/2020	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder actio	n and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s sufficient for approval.)
☐ The amendment(s) was/were a must be separately provided f:	pproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
100 by		
D	(voting group)	
/selec	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other countried fiduciary by that fiduciary) JONY COTO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	