# P1900054058

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# COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	J&JREMODEL	_ATION AND	MORE, CC	RP
DOCUMENT NUMBER:	D100000E40E9			
The enclosed Articles of Amend		ibmitted for fil	ing.	
Please return all correspondence	concerning this ma	itter to the follo	owing:	
YNNHOL	DELGADO			
	<del></del>	Name of C	ontact Persor	1
J&JRE	J & J REMODELATION AND MORE, CORP			
		Firm/ (	Company	
11942 D	ONLIN RD			
		Ad	dress	
WELLING	GTON, FL 33414			
		City/ State	and Zip Cod	e
DOROTE	EA502000@HOTI	MAIL.COM		
E-ma	il address: (to be u	sed for future a	innual report	notification)
For further information concerni				
JOHNNY DELGADO  Name of Contact Person		at	954	283-8513
Name of Contact	Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the follow	wing amount made	payable to the	Florida Depa	ntment of State:
	3.75 Filing Fee & rtificate of Status	Certified	Copy il copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations				Address Iment Section
		Division of Corporations		
P.O. Box 6327 Tallahassee, Fl				Building Executive Center Circle
			Tallaha	issee, FL 32301

### Articles of Amendment

to

### Articles of Incorporation

a.f

## J & J REMODELATION AND MORE, CORP

P19000054058					
(Document N	umber of Corporation (if known)				
Pursuant to the provisions of section 607,1006, Florida Statuits Articles of Incorporation:	ites, this Florida Profit Corporation :	adopts the fo	ollowing an	rendment(s	
A. If amending name, enter the new name of the corpora	ntion:		1.1.	e new	
name must be distinguishable and contain the word "co "Corp , " "Inc., " or Co., " or the designation "Corp, " "In word "chartered," "projessional association, " or the abbre	ic," or "Co" A professional corpor		the abbre	viation	
B. Enter new principal office address, if applicable:	11942 DONLIN DR	11942 DONLIN DR			
(Principal office address <u>MUST BE A STREET ADDRESS</u>	WELLINGTON, FL 334	14		20	
				]0 6[	
C. Enter new mailing address, if applicable: (Mailing address M-1Y BE A POST OFFICE BOX)	11942 DONLIN DR	· · · · · · · · ·	, -	2019 OCT 15	
(2700) 10 10 10 10 10 10 10 10 10 10 10 10 10	WELLINGTON, FL 334	14		<del></del>	
			-	—မွာ မာ	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		me of the			
Name of New Registered Agent		- <del> </del>	<del></del>		
-	Turnla street address)				
11942 DONLIN DR. WELLINGTON		. Florida	3414		
The state of the s	tCity)		(Zip Code)		
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent—Lam f.		ns of the pos	sition		
Signature o	of New Registered Agent, if changing	<del></del>			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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; F. Treasurer; S. Secretary, D. Director; TR. Trustee, C. Chairman or Clerk, CEO. Cl. Executive Officer, CFO. Chief Financial Officer. If an officer director holds more than one title, list the first letter of each off 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 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 Chang-Mike Jones, V as Remove, and Sally Smith, SV as an Add

EXample: <u>X</u> Change	<u>PT </u> <u>J</u>	ohn Doe	
X Remove	<u>V</u> _ <u>N</u>	<u>slike lones</u>	
X Add	<u>8V</u> <u>\$</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	Р	JOHNNY DELGADO	11942 DONLIN DR
Add			WELLINGTON, FL 33414
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		4	
Add			
Remove			

If amending or adding additional A (Attach additional sheets, if necessary,	g - (Be specifie)	
·	<del></del>	_
		—
		-
If an amendment provides for an ex	schange, reclassification, or cancellation of issued shares, neudment if not contained in the amendment itself:	
(if not applicable, indicate N A)		
		. <b></b>

The date of each amendment(s) adoption:		
date this document was signed.  Effective date if applicable:	10/08/2019	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do- document's effective date on the Departmen	es not meet the applicable statutory filing requirements, this t of State's records.	date will not be listed as
Adoption of Amendment(s) (	CHECK ONE)	
The amendment(s) was/were adopted by by the shareholders was/were sufficient [	the shareholders. The number of votes east for the amendme for approval.	$\operatorname{int}(s)$
	y the shareholders through voting groups. The following state ting group entitled to vote separately on the amendmentisy	ement
	mendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder	older
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder	
10/05/2019 Dated	<del></del>	
Signature	oling of gels president or other other if directors or officers have not be	
(By a director, p	president or other other if directors or officers have not be	en -
	incorporator – if in the hands of a receiver, trustee, or other c iary by that fiduciary)	ourt
appointed fiduc	•	
	JOHNNY DELGADO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	