P190000 63737

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000333647790

08/27/19--01024--014 **35.00

FILED

19 AUG 27 PM 5: 17

SEGRELARY OF STATE

SEP-6 \$7

COVER LETTER

NAME OF CORPORATION: Premier Consulting Services and Estimating E

NAME OF CORPORATION: Iremier Consulting Dervices and Estimation					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Maria Poveda Name of Contact Person					
Firm/ Company					
16172 SW 151 St. Address					
Miami - FL 33196 City/ State and Zip Code					
Maria Doveda on line @ amail com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Maria Poveda at (305) 338-2144 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 Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)					
Mailing Address Street Address					

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

Premier Consulting Sorvice	resand Estimating Corr
(Name of Corporation as currently file	ed with the Florida Dept. of State)
P1900006373	37
(Document Number of Co	rporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co' word "chartered," "professional association," or the abbreviation "P.A	. A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	N/A SEE SE T
(Florida street a	ddress) SS SS
New Registered Office Address:	Florida On Code
(City	· (/др Coae)
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.
$\frac{1}{2}$	
Signature of New Regis	tered Agent, if changing
a de la companya del companya de la companya del companya de la co	the state of the s

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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:

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. Ther 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 Chan Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	(<u>Addres</u> s	
1) Change			√A		
Add				<u>-</u>	
Remove					
2) Change		N	/A	.	
Add				<u> </u>	
Remove		.	. /^	20	; G) 1
3) Change			JA		7
Add				100 N	Si D
4) Change			J. A.		7
Add					
Remove			1	 .	
5) Change			VA		
Add					
Remove			j		
6) Change		_ <u>N</u>	/A		
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
	
\sim	
1	
	
	75
	
	AUG ARRE
	Sued shares,
F. If an amendment provides for an exchange, reclassification, or cancellation of is	
provisions for implementing the amendment if not contained in the amendment	t itself:
(if not applicable, indicate N/A)	54 v. C
	<u>===============================</u>
——————————————————————————————————————	
	-
	

The date of each amendment(s) adoption:	, if other than
date this document was signed.	
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 document's effective date on the Department of State's records.	ill not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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.	P AUG 2
Dated8/20/19	LED 27 PM 5
Signature Signature	ت ^ت
(By a director, president or other officer – if directors or officers have not become	17
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Jonathan Acosta	
(Typed or printed name of person signing)	
President	
(Title of person signing)	