PIACCO OGS 163

(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:
L <u></u>

Office Use Only



10033435859

2011

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: GARVEL BUILDERS INC. P19000065163 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JESENIA GIL Name of Contact Person STOK KON + BRAVERMAN, P.A. Firm/ Company I EAST BROWARD BLVD, SUITE 915 Address FORT LAUDERDALE, FL 33301 City/ State and Zip Code avendaoc2@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 237-1777

Area Code & Daytime Telephone Number JESENIA GIL Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

GARVEL BUILDERS INC. (Name of Corporation as currently filed with the Florida Dept. of State) P19000065163 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following ame its Articles of Incorporation: A. If amending name, enter the new name of the corporation; name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must conta 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) 9 2 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) J 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 (Florida street address) New Registered Office Address: Florida (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

address of each Officer: (Attach additional sheets, Please note the officer/dir P = President; V= Vice i Executive Officer; CFO: held. President, Treasure Changes should be noted	and/or D if necess rector title President Chief F r, Directo in the folives the co	irector b ary) e by the fi ; T= Trec inancial or would i llowing m orporatio	eing added: irst letter of the off asurer; S= Secreta Officer. If an offi be PTD. anner. Currently n, Sally Smith is n	ice title: ary; D= Director; T icer/director holds n John Doe is listed a	Ticer/director being removed and tition TR= Trustee; C = Chairman or Clerk; nore than one title, list the first letter is the PST and Mike Jones is listed as the should be noted as John Doe, PT	(a
X Change	<u>PT</u>	John Do	<u>к</u>			
X Remove	Y	Mike Jo	nes			
_X Add	<u>sv</u>	Sally Sn	nith			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s	
1) Change	VP		Augusto Andres	Aguirre Amaya	5612 ROSE GARDEN RD	
X Add	-	_	-		UNIT 201	_
Remove					CAPE CORAL, FL 33914	_
2) Change		-			-	-
Add						-
Remove						-
3) Change		-				_
Add						-
Remove						
4) Change		_				
Add						
Remove						
5) Change	-	_		<u>. </u>		
Add						
Remove						
6) Change		_				
Add						
Rетюче						

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	1
· · · · · · · · · · · · · · · · · · ·	-
	-
	
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)	
	_
· · · · · · · · · · · · · · · · · · ·	
	<u> </u>
	<u> </u>

The date of each amendment		fother
date this document was signed		
Effective date if applicable:	08/14/2019	1
Enecuve date it apprendit.	(no more than 90 days after amendment file date)	†
	this block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	be list
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
☐ The amendment(s) was/wer must be separately provide	re approved by the shareholders through voting groups. The following statement and 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)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
09/13/ Dated	/2019	
Signature <u>\frac{1}{2}</u>	fm //	
	by a director, president or other officer - if directors or officers have not been	
•	elected, by an incorporator - if in the hands of a receiver, trustee, or other court	
ar	pointed fiduciary by that fiduciary)	
	Luis Velandia	
	(Typed or printed name of person signing)	\vdash
	President	
	(Title of person signing)	Ť T

ί.