P1000 06 303

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	me)
(Docu	ıment Number))
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



700335472857

10/24/19--01002--007 **35.00

Namachs

NOV 2 1 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MENEZES SERV	ICES, INC.		
DOCUMENT NUMB	ER: P19000065303			
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	ALESSANDRO DE MENEZ	ZES JAIME		
-		Name of Contact Person	1	
MENEZES SERVICES, INC.				
•		Firm/ Company		
	495 SE 8TH ST, APT 236			
-		Address		
	DEERFIELD BEACH, FL 3	3441		
-		City/ State and Zip Cod	e	
CONT	'ATOALESSANDROMENE	ZES@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:	805-2368	
Name of Contact Person		at (Area Co	de & Daytime Telephone Number	
	the following amount made			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divis P.O.	ing Address ndment Section tion of Corporations Box 6327 hassee, F1, 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle ussee, FL 32301	

Articles of Amendment to Articles of Incorporation of

MENEZES SERVICES, INC.

MENELES SERVICES, INC.			<u> </u>
(Name of Corp	oration as currently f	iled with the Florida Dept. of State)	
P19000065303			, , , ,
(1	Document Number of C	orporation (if known)	~
Pursuant to the provisions of section 607,1006, F its Articles of Incorporation:	Torida Statutes, this Flo	orida Profit Corporation adopts the foll	owing amendmen
A. If amending name, enter the new name of the	the corporation:		
MENEZES DESIGN & UPHOLSTERY, INC.			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," of	Corp," "Inc," or "Co	A professional corporation name i	he abbreviation
B. Enter new principal office address, if appli	ion blar	N/A	
(Principal office address MUST BE A STREET			
C. Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFIC	E BOX)	INV	
 If amending the registered agent and/or re new registered agent and/or the new registered. 		s in Florida, enter the name of the	
N/A			
Name of New Registered Agent			
	(Florida street	address)	
. N/A	17 100 100 100 100 100 100 100 100 100 1	,	
New Registered Office Address:	ıc	, Florida ity)	(Zip Code)
		•	•
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag	g Registered Agent:	h and accept the obligations of the posi	tion
a management supplemental survey and the segment of seg	, <i> y</i>	the point	·
			· · · · · · · · · · · · · · · · · · ·
	- Signature of New Reg	istered Agent, if changing	

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 Dog	<u>.</u>	
X Remove	<u>V</u>	Mike Jor	n <u>es</u>	
<u>X</u> Add	\underline{SV}	Sally Sm	<u>ìth</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3.) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
51 Change				
Add				
Remove				
6) Change				
Add				
Remove				

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

	OCTOBER 21, 2019	
The date of each amendment(s date this document was signed.		, if other than the
	OCTOBER 21, 2019	
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)	
Note: If the date inserted in the	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
	BER 21, 2019	
Dated Signature /	ah 112	
(By sele	a director, president or other officer - if directors or officers have not been eted, by an incorporator - if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	ALESSANDRO DE MENEZES JAIME	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	