## P190000 69913

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	. <del></del>
(Cit	y/State/Zip/Phone	#)
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(Do	cument Number)	
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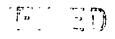
## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BEST OF THE BE	EST DRYWALL INC	
DOCUMENT NUM	BER: P19000069973		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Francisco Herrera Mendoza		
	<del></del>	Name of Contact Persor	1
	BEST OF THE BEST DRYV	VALL INC	
		Firm/ Company	····
	7 Press Way		
		Address	
	Palm Coast FL 32164		
		City/ State and Zip Code	3
	E-mail address: (to be us	sed for future annual report	notification)
	,	•	,
For further information	on concerning this matter, pleas	se call:	
Francisco Herrera M	endoza	850	699-7666 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State;
☐ \$35 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)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



BEST OF THE BEST DRYWALL INC	2019 OCT 29 AM 8: 35
(Name of Corporation as current	ntly filed with the Florida Dept, of State)
P19000069973	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". 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
(Mailing dadress MAT BE A POST OFFICE BOX)	
	<del></del>
D. If amending the registered agent and/or registered office ad	ldress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Name of New Registered Agent N/A	
(Florida	street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	nt·
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.

Signature of New Registered 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Maria Herrera Vega	108 CARSON DR
X Add			FT WALTON BEACH, FL 32548
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			<del>-</del>
6) Change			
Add			<del></del>
Remove			

E. If amending or adding additional Art (Attach additional sheets, if necessary).	ricies, enter change(s) nere: ). (Be specific)	
N/A		
<u></u>		
F. If an amendment provides for an exc	change, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	nendment if not contained in the amendment itself:	
N/A		
N/A		_

The date of each amendment(s)	10-24-19	, if other than the
i he date of each amendment(s) fate this document was signed.	adoption:	, ii other than the
	/A	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will Department of State's records.	I not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast 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 ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
10-24-19		
Dated	Yanasa Herra Mindra	_
(By:	a director, president or other officer - if directors or officers have not been	—
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)	
	Francisco Herrera Mendoza	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	<del></del>