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	(Cit	y/State/Zip/Phon	e #)	_
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Special Insti	uctions to	Filing Officer		
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PILEU 2024 SEP 16 AM 9: 23 TALLAHÁSSÉE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	ON: E R RESTORATIO	ON & PAINTING SERVIC	CES INC
	P19000088683		
The enclosed Articles of An	nendment and fee are sul	bmitted for filing.	·
Please return all correspond	ence concerning this ma	tter to the following:	
EDW	IN RETAMAR		
		Name of Contact Person	n
	<u> </u>	Firm/ Company	
1006	PINEAPPLE WAY		
		Address	
KISS	IMMEE, FLORIDA 347	741	
		City/ State and Zip Cod	e
	E-mail address: (to be us	ed for future annual report	notification)
	5		
For further information con-	cerning this matter, pleas	se call:	•
EDWIN RETAMAR		at (818-7606
Name of Cor	ntact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Dep	artinent 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)
Division o P.O. Box	ent Section of Corporations	Ameno Division The C 2415	Address dment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2024 SEP 16 AM 9: 23

E R RESTORATION & PAINTING SERVICES INC

(<u>N</u>	ame of Corporation as current	ly filed with the Florida D	ept. of State) ANY C. GR
P19000088683			TALLAHASSEE. FLOT
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of sections Articles of Incorporation:	n 607.1006. Florida Statutes, this	Florida Profit Corporation	adopts the following amendment
A. If amending name, enter the r	new name of the corporation:		
		<u>-</u>	The new
name must be distinguishable and c 'Inc.," or Co.," or the designati 'chartered." "professional associa	on "Corp," "Inc," or "Co".	A professional corporation	d" or the abbreviation "Corp.," a name must contain the word
3. Enter new principal office add	iress, if applicable:		
Principal office address <u>MUST B</u>			
Enter new mailing address, if	applicable:		
(Mailing address MAY BE A F	OST OFFICE BOX		
). If amending the registered ag	ont and/or registered office ad-	trees in Marida anter the	name of the
	he new registered office addres		tanty VI III
Name of New Registered :	1 april		
trame of the Regimeren.			
	(Florida s	treci address)	
Now Books and Office Ad	du saas		, Florida
New Registered Office Add	<u></u>	(Ciṇ)	(Zip Code)
lew Registered Agent's Signatur hereby accept the appointment as	e, if changing Registered Agen	tt: with and accept the obligat	tions of the position.
	, -8	, , , , , , , , , , , , , , , , , , , ,	,
		B	
	Signature of New	Registered Agent, if changin	18
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u> </u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Address</u>
1) Change	VP	MARIA A. CHINEA	5380 CARAMELLA DR
X Add			ORLANDO, FLORIDA 32829
Remove			
2) Change			
Add			
Remove Change			
Add			•
Remove			
4) Change			
Add			
Remove			
5) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
6) Change			
Add			
Remove			

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f an	amendmen	it provide	s for an e	change, r	eclassific	ation, or	cancellat	ion of issu	ied shares	<u>i.</u>	
prov	isions for i	mplemen	ting the ar	nendmen:	t if not co	ntained	in the ame	endment:	itself:		
,	if not appli	сарге, та	icaie (v/A)								
											
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The date of each amendment(s	s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the amendme e sufficient for approval.	
must be separately provided	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	cast for the amendment(s) was/were sufficient for approval	SEP 16 H
· · · · · · · · · · · · · · · · · · ·	(voting group)	F. F. S.
SEPT Dated	EMBER 16TH, 2024	9: 23 FLORIDA
Signature	Clum Redginger	
sele	a director, president or other officer – if directors or officers have not beceted, by an incorporator – if in the hands of a receiver, trustee, or other cointed fiduciary by that fiduciary)	
	EDWIN RETAMAR ORIOL JR.	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	