## P190000 94650

(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:			
-			





900339410569

01/22/30--01016--030 \*\*55.00

)(라. 122 milo: 2n

R. WHITE FEB 1 8 2020

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Florida 5 stars Rem	nodeling Inc.	· <u> </u>			
DOCUMENT NUM	<b>DOCUMENT NUMBER:</b> P 19000094650					
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all corre	espondence concerning this ma	tter to the following:				
	Andre Luis D. Silva					
	Name of Contact Person					
	Florida 5 Stars Remodeling Inc.					
	Firm/ Company					
	1701 Sutherland Rd					
	Address					
	Lynn Haven / FL /32444					
		City/ State and Zip Code				
	andre@presticiousrenovation.com					
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
Andre Luis D. Silva		at ( 321	519-6041			
Name	of Contact Person	Area Coo	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Am Div P.C	iling Address tendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The Cc 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

## Articles of Amendment to Articles of Incorporation of

2(2) 5 -22 1410:20

Florida 5 Stars Remodeling Inc.

Gled with the Florida Dept. of State) Corporation (if known)
Corporation (if known)
Corporation (if known)
orida Profit Corporation adopts the following amendment(s)
The new
npany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
N/A
N/A
s in Florida, enter the name of the
address)
,
. Florida

## Check if applicable

- **≡** The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.
- ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

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.

X Change	PT	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
I) Change		_	N/A
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If ame	nending or adding additional Articles, enter change th additional sheets, if necessary). (Be specific)	( <u>s) here</u> :
N/A	an additional success, if necessary, the specific	
18/74		
		, <u>.</u>
	•	<del>.</del>
- <del></del>		
	<del> </del>	
	· · · · · · · · · · · · · · · · · · ·	
F. <u>If an a</u>	amendment provides for an exchange, reclassificat	ion, or cancellation of issued shares,
prov	<u>visions for implementing the amendment if not cont</u>	tained in the amendment itself:
	(if not applicable, indicate N/A)	
N/A		
		<del>-</del>
-		

•

The date of each amendment	01/05/2020 (c) adoption:	, if other than the
date this document was signed		, is other than the
Effective date <u>if applicable</u> :	01/05/2020	
Effective date in applicable.	(no more than 90 days after amendment file date)	<del></del>
	his block does not meet the applicable statutory filing requirements, ne Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendere sufficient for approval.	lment(s)
	e approved by the shareholders through voting groups. The following d 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)	
	(voling group)	
	/2020	
Dated		
Signature		
(B	y a director, president or other officer - if directors or officers have not	
	lected, by an incorporator – if in the hands of a receiver, trustee, or oth- pointed fiduciary by that fiduciary)	er court
	Andre Luis D. Silva	
	(Typed or printed name of person signing)	
	Owner	



State of Alorida County of Brevard

(Title of person signing)

the foregoing instrument was acknowledged before me this 15th day of January of 2020 by Andre C. Silva