12/12/2020 SAT 10:16 FAX --- sunbiz amendment





2001 J 001

COVER LETTER

TO: Amendment Section Division of Corporations

-:

NAME OF CORPORATION: ______ A&A ALL IN ONE SERVICES CORP

DOCUMENT NUMBER: _____

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ELIZABETH FLEITAS

Name of Contact Person

AB ALL SERVICES INC

Firm/ Company

1100 WEST 29ST STE

Address

HIALEAH FL 33012

City/ State and Zip Code

AB1100@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELIZABETH FLEITAS at (305) 882-1238 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a clicck for the following amount made payable to the Florida Department of State:

S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fec & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
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Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

The new

Articles of Amendment to Articles of Incorporation oſ

A&A ALL IN ONE SERVICES CORP

(Name of Corporation as current	lv filed with the Florida Dept. of State)

P20000010457

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to 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 abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

В. (Рі	Enter new principal office address, incipal office address <u>MUST BE A S</u>	f applicable: TREET ADDRESS)			_
C.	Enter new mailing address, if applied (Mailing address MAY BE A POST)	<u>cable:</u> <u>)FFICE BOX</u>)			
			÷	12	_
			1-		
			1	5	;
D.	If amending the registered agent ar new registered agent and/or the new	d/or registered office address in Florida, ent v registered office address:	er the name of the		. – . TI
Name of New Registered Agent	SONIA ARMENTEROS		2	C	
		8912 NW ISOTH TER	G	မ္	
	(Florida street address)			\sim	
New Registered Office Address:		MIAMILAKES	, Plorida		
		(City)	(7.ip /	Cade)	

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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>PT</u>	<u>John Doe</u>	
X Remove	Ϋ́	Mike Iones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
1) Change	Р	ADAEL GARCIA	8912 NW 150TH TER
Add			MIAMI LAKES FL 33018
X Remove			
2) Change			
Add			8912 NW 150TH TER
3) Remove	P	SONIA ARMENTEROS	MIAMI LAKES, FL 33018
XAdd			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E.	If amending or adding additional Arti	<u>icles, enter change(s) here</u> :
	(Attach additional sheets, if necessary).	

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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)

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12/12/2020	10 J 31 - 41-
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sh action was not required.	archolder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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 (valing group)	
12/12/2020 Dated/)	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	-
ADAEL GARCIA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	