P20000017985

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2/28/21

COVER LETTER

TO: Amendment Section Division of Corporations

	ATION: SOBRINO'S AIR &	DUCT SERVICE CORP.	
DOCUMENT NUMBE	ER: P20000017985		
The enclosed Articles of	f Amendment and fee are sub	omitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
N	MAURICIO DE ZAYAS		
_		Name of Contact Person	
Firm/ Company			
8	906 NW 144TH TERRACE		
_		Address	
5	MIAMI LAKES, FL 33018		
-		City/ State and Zip Code	
ð	MAURICIODEZAYAS@GM	1AIL.COM	
_	E-mail address: (to be us	ed for future annual report i	notification)
For further information	concerning this matter, pleas	e call:	
MAURICIO DE ZAYA	AS	at (226-6568
Name of	Contact Person		e & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment 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)
Amer Divis P.O. 1	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Division The Co 2415 N	Address ment Section n of Corporations ntre of Tallahassee l. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE TALL ARTESSEC STATE (Document Number of Corporation (if known)) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following a fix Articles of Incorporation: A. If amending name, enter the new name of the corporation: IMPERIAL MECHANICAL CONTRACTOR, CORP. "Inc." or "Co." a professional corporation name must contain "Inc." or "Co". A professional corporation name must contain "Chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Mailing address MUST BE A STREET ADDRESS) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent New Registered Office Address: N	BRINO'S AIR & DUCT SERVICE CORP.	2021 JAN 15 PM 3: 24
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following sits Articles of Incorporation: A. If amending name, enter the new name of the corporation: IMPERIAL MECHANICAL CONTRACTOR. CORP. Iname must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "lnc.," or Co.," or the designation "Corp." "lnc," or "Co". A professional corporation name must contain "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent:	(Name of Corporation as curren	tly filed with the Florida Dept. of State)
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following a its Articles of Incorporation: A. If amending name, enter the new name of the corporation: IMPERIAL MECHANICAL CONTRACTOR. CORP. Imme must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "lnc.," or "Co.", a professional corporation name must contain "chartered." "professional association." or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent	000017985	SECRETARY OF STATE
A. If amending name, enter the new name of the corporation: IMPERIAL MECHANICAL CONTRACTOR, CORP. **Tome must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "lnc.," or Co.," or the designation "Corp." "lnc." or "Co". A professional corporation name must contain "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: **Principal office address MUST BE A STREET ADDRESS** C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: **Name of New Registered Agent** New Registered Office Address: **New Registered Office Address:** **New Registered Agent's Signature, if changing Registered Agent:** **New Registered Agent's Signature, if changing Registered Agent:**	(Document Number	of Corporation (if known)
IMPERIAL MECHANICAL CONTRACTOR, CORP. The man must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "lnc.," or Co.," or the designation "Corp," "lnc," or "Co". A professional corporation name must contain "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent A		s Florida Profit Corporation adopts the following amendment(s
The mast be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain "Chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Office Address: (City) (Zip Content of the abbreviation, "company, "or "incorporated" or the abbreviation, "company," or "incorporated" or the abbreviation, "company," or "incorporated" or the abbreviation, "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the most contain to "Co". A professional corporation name must contain the most	If amending name, enter the new name of the corporation:	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent:	PERIAL MECHANICAL CONTRACTOR, CORP.	The new
Name of New Registered Agent New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent:	c.," or Co.," or the designation "Corp," "Inc," or "Co". artered," "professional association," or the abbreviation "P.A. Enter new principal office address, if applicable: incipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	A professional corporation name must contain the word
(Florida street address) New Registered Office Address: NA (City) . Florida (Zip Cod	new registered agent and/or the new registered office addres	ss:
New Registered Office Address: N (City) Florida (Zip Cod	•	
New Registered Agent's Signature, if changing Registered Agent:	(Florida s	street address)
New Registered Agent's Signature, if changing Registered Agent:	New Registered Office Address: NR	
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	·	(Ciry) (Zip Code)
J/R	reby accept the appointment as registered agent. I am familiar	r with and accept the obligations of the position.
Signature of New Registered Agent, if changing	Signature of New	Registered Agent, if changing

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)

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 Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		JA	
Add			
Remove			
2) Change		N 4	
Add			
Remove 3) Change	<u> </u>	NA	
Add			
Remove			
4) Change		NIA	
Add			
Remove			
5) Change		NA	
Add			
Remove		• 1	
6) Change		r/A	
Add			
Remove			

4	<mark>ng or adding addit</mark> litional sheets, if ne	cessary). (Be	specific)				
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	ndment provides fo		lossificatio	n or cancellati	an af irenad sh	arac	
nrovision	is for implementin	o the amendme	nt if not conta	ined in the ame	ndment itself:	41(3)	
(if no	t applicable, indica	te N/A)	,				
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The date of each amendment(s) adoption:	ther 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 this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	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 shareholder action was not required.	older
■ 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" (voting group)	
(voting group)	
1/12/2021 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)	
MAURICIO DE ZAYAS	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	