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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SANCHEZ LATH	& INSTALLATIONS INC			
DOCUMENT NUMBER: P20000018617				
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	itter to the following:			
FILIBERTO SANCHEZ				
	Name of Contact Person			
SANCHEZ LATH & INSTA	LLATIONS INC			
777 13 142 361	Firm/ Company			
5205 BROSCHE ROAD	• •			
	Address			
ORLANDO, FL 32807				
	City/ State and Zip Code			
fili.sanchez21@gmail.com				
E-mail address: (to be us	sed for future annual report notification)			
For further information concerning this matter, pleas	se call:			
Filiberto Scin Chez				
Name of Contact Person	at () Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made p				
■ \$35 Filing Fee	Certified Copy (Additional copy is enclosed)  Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation $\mathbf{of}$

(Name of Corporation as cu	rrently filed with the Flor	rida Dept. of State)	<del></del>	
P20000018617		,		
(Document Nun	nber of Corporation (if kno	own)	<del>-</del>	
Pursuant to the provisions of section 607,1006, Florida Statutes its Articles of Incorporation:	s, this <i>Florida Profit Corpo</i>	oration adopts the following	g amendment(s)	ю
A. If amending name, enter the new name of the corporation	on:			
			The new	
name must be distinguishable and contain the word "corporation" Inc., " or Co.," or the designation "Corp." "Inc," or "Contain "Chartered," "professional association," or the abbreviation	o". A professional corpe			
B. Can annualization of the Co. I. C. C. I. I.			702	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<del></del>		<del></del>	
,			7070 JUL 22	
			22	
				-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			5 .	,
			AM 10: 33	
		<del></del>	<del></del>	
D. If amending the registered agent and/or registered office		r the name of the		
new registered agent and/or the new registered office ad	<u>ldress:</u>			
Name of New Registered Agent		· · · · · · · · · · · · · · · · · · ·	_	
<i>(Flor</i>	ida street address)		•	
New Registered Office Address;		. Florida		
	(City)	, i tortda(Zip (	Code)	
New Registered Agent's Signature, if changing Registered 1 I hereby accept the appointment as registered agent. I am fam	Agent:	Aliantina aliah manati		
The street of the supposition of	mur win und accept incer	оиданоть од те розиют.		
Signature of N	New Registered Agent, if ch	nanging	•	
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= Trustec; 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 Doc 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	<u>V</u>	<u>Mike Jones</u>	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	SV	VENEL CLERVEAUX	21 SURA BLVD
X Add			ORLANDO, FL 32809
Remove			
2) Change	<del></del>		
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
61 Change			
Add			
Remove			

	l sheets, if necessary).	. (Be specific)			
		,			
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		<del></del>	<del> </del>	<del></del>	
an amendmen	t provides for an exc	hange reclassificat	ion or cancellation	of issued shares	
rovisions for i	mplementing the am	endment if not con	tained in the amend	ment itself:	
(if not applie	cable, indicate N/A)				
			<del></del>		
			<del></del>	· · · · · · · · · · · · · · · · · · ·	
			1		-

The date of each amendment(s):	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file dat	<i>c)</i>
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requireme epartment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the autificient for approval.	nendment(s)
	proved by the shareholders through voting groups. <i>The follow</i> reach voting group entitled to vote separately on the amendmen	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
07/16/2020 Dated		
selecte	irector, president or other officer – if directors or officers have d, by an incorporator if in the hands of a receiver, trustee, or ited fiduciary by that fiduciary)	
	FILIBERTO SANCHEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>