P20000 34139

(Reque	estor's Name)	
(Addre	ss)	····
(Addre	ss)	
(City/S	tate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busin	ess Entity Name)	
(Docur	ment Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fili	ng Officer;	

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JUN . 7 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ALL EMBRA	ACED IMPROVEMENT CORP			
DOCUMENT NUMBER: P20000034139				
The enclosed Articles of Amendment and fee a	are submitted for filing.			
Please return all correspondence concerning th	is matter to the following:			
STEWART STERNBA	СН			
	Name of Contact Person			
SSTG, INC				
	Firm/ Company			
100 MERRICK ROAD				
	Address			
ROCKVILLE CENTRE	, NY 11570			
	City/ State and Zip Code			
STEWARTMRR@AOL	СОМ			
E-mail address: (to	be used for future annual report notification)			
For further information concerning this matter, please call:				
STEWART STERNBACH	at (⁵¹⁶) 7643110			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Statu	& \$\Bigs_\$43.75 Filing Fee & \$\Bigs_\$\$52.50 Filing Fee			
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 Articles of Incorporation of

ALL EMBRACED IMPROVEMENT CORP

oration as curre	ntly filed with the Florid	o Done of State)	
Control of the control	mer med with the Florid	a Dept. of State	
Document Numbe	er of Corporation (if known	1)	
Florida Statutes, th	nis <i>Florida Profit Corpora</i>	tion adopts the following	ng amendment(
the corporation:			
			The new
		aled" or the abbreviation name must conta	ion "Corp.," in the word
cable:	N/A		
ADDRESS)		•:	2002
			5:
			72
E BOX)	N/A		
			3.
		-	ص بن _
<u>zistered office ad</u> ered office addre	dress in Florida, enter th	e name of the	
·			
nny Isles Blvd			-
(Florida s	treet address)		-
sles Beach		Elected 33160	
·	(City)	, rionga(Zip (Code)
		•	·
Dagistanodka		·	·
Registered Agen nt. I am familiar	t: with and accept the obliga	·	ŕ
Registered Agen nt. I am familiar	<u>t:</u> with and accept the oblige	·	ŕ
Registered Agen nt. I am familiar	t: with and accept the obliga	·	,
nt. I am familiar	with and accept the obliga	itions of the position.	
nt. I am familiar	t: with and accept the obligation Registered Agent, if changi	itions of the position.	
	Document Number Florida Statutes, the the corporation: "Inc," or "Co". abbreviation "P. Abbreviation "P. Abbreviation" EBOX gistered office adered office addresed office a	Document Number of Corporation (if known Florida Statutes, this Florida Profit Corporation: the corporation: "Inc," or "Co". A professional corporation "P.A." icable: "ADDRESS) N/A Ristered office address in Florida, enter the ered office address: forris Revivo Inny Isles Blvd (Florida street address) [Sles Beach	rd "corporation," "company." or "incorporated" or the abbreviate. "Inc," or "Co". A professional corporation name must conta abbreviation "P.A." icable: N/A **CADDRESS** N/A **Professional corporation name must conta abbreviation "P.A." N/A **Professional corporation name must conta abbreviate. N/A **Profession name must corporation name must conta abbreviate. N/A **Profession name mus

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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 = (Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office 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. The 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 Cha Mike Jones, V as Remove, and Sally Smith, SV as an Add Example:

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	PD	Stewart Stembach	200 Sunny Isles BLVD
Add			BLDG 2 #806
X Remove			Sunny Isles Beach, FL 33160
2) Change	PD	Mor Moris Revivo	200 Sunny Isles BLVD
X Add			BLDG 2 #806
Remove 3) Change			Sunny Isles Beach, FL 33160
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific) N/a 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) N/a	N/a 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) N/a		
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) N/a	7. 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) N/a	N/a	
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(if not applicable, indicate N/A) N/a	(if not applicable, indicate N/A) N/a	F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
N/a	N/a	(if not applicable, indicate, N/4)	
			

May 15, 2020	
The date of each amendment(s) adoption: dax this document was signed.	, if other than to
May 15, 2020 Effective date if applicable:	
(no more than 90 days after amendment fil	e date)
Note: If the date inserted in this block does not meet the applicable statutory filing requi document's effective date on the Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without action was not required.	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the ame	ollowing statement ndment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated	
Signature	
(By a director, president or other officer - if directors or officers selected, by an incorporator - if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	have not been e, or other court
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
(Title of person signing)	