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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Speciał Instructions to Filing Officer:						





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2020 AUG 27 PH 1: 49
SECRETARY OF STATE

OCT 10 2020

<u>COVER LETTER</u>	
TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: Lenaissance Detailing (O)	
DOCUMENT NUMBER: Y(XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Dedio E. Aguiar Name of Conjuct Person	
Penaissance Detailing Corp	
1385 17th CT SW	
Vero Beach Fr 32962	
City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Plato E. Aguiar at (772) 501-1874 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 S43.75 Filing Fee SCertificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) \$35 Filing Fee Sature S43.75 Filing Fee Scertified Copy Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amandment Sertion	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

Dannissange Datailing Cov for
(Name of Corporation as currently filed with the Florida Dept. of State)
(Name of Corporation as currently fried 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 amediment(s) its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1385 1745 CT SW VWO Blum 4232962
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 1385 17th CT SW WWO Black Ft 32967
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 Deal Color Aguilar
New Registered Office Address: VIND BEACH , Florida 32902 (City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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; CF() = 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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>				
X Remove	<u>v</u>	Mike Jo	ones				
X Add	<u>sv</u>	Sally Si	mith_				
Type of Action (Check One) 1) Change Add	<u>Title</u>	<u>)</u>	Henrry D	<u>omigu</u> z arcia	Address		
Remove 2) Change Add	2	_	pedro E.	Aguiar	1385 VMO	17th CTE Beach FL	32962 3W
Remove 3) Remove Add							
Remove 4) Change Add		_					-
Remove 5) Change Add		_					-
Remove 6) Change Add		_					-
Remove							

<u>11 amending 0</u> (Attach <i>additi</i>	or adding additional on all sheets, if necessor	iry). (Be spe	r change(s) nei cific)	<u>. c</u> .		
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If an amendi	nent provides for a	exchange re	classification, o	r cancellation o	of issued shares.	
provisions f	or implementing the	amendment i	f not contained	in the amenda	nent itself:	
(if not a	pplicable, indicate N	(A)				
						
					. —	
		<u>. </u>				
	<u>.</u>					

The date of each amendment(s) adoption: date this document was signed.		<u> </u>	, if other than the
Effective date if applicable:	08/10	1/2020	
(ne	o more than 90 days afte	er amendment file date)	
Note: If the date inserted in this block does not m document's effective date on the Department of Sta	neet the applicable statu te's records.	itory filing requirements, this date v	will not be listed as the
Adoption of Amendment(s) (CHEC	K ONE)		
The amendment(s) was/were adopted by the incoaction was not required.	orporators, or board of d	lirectors without shareholder action a	and shareholder
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appr		of votes east for the amendment(s)	
☐ The amendment(s) was/were approved by the shamust be separately provided for each voting gro			
"The number of votes cast for the amendm	ent(s) was/were sufficie	nt for approval	
by		"	
Signature (By a director, president selected, by an incorpor appointed fiduciary by	t or other officer — fellor rator — if in the hands of	ectors or officers have not been a receiver, trustee, or other court	
————(Тур	ped or printed name of pe	Domingue 2 erson signing)	Garcia
(Tit)	YES DENT e of person signing)		