P20000071547

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: TOLENTINO FR.	AMING INC			
DOCUMENT NU	JMBER: P20000071547				
	cles of Amendment and fee are su	ibmitted for filing.			
Please return all co	orrespondence concerning this ma	atter to the following:			
	MIGUEL A TOLENTINO F	RANCO			
	Name of Contact Person				
	TOLENTINO FRAMING INC				
		Firm/ Company			
	5109 FLEMING RD				
		Address			
	PLANT CITY, FL 33565				
		City/ State and Zip Cod	e		
	ATEPAYROLLUS@GMAI	L.COM			
	E-mail address: (to be u	sed for future annual report	notification)		
	ation concerning this matter, plea	se call:at (\frac{813}{})	451-7071		
Na	me of Contact Person		de & Daytime Telephone Number		
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	e □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Division The C 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

	of
TOLENTINO FRAMIN	∜G INC,
	(Name of Corporation as currently filed with the Florida Dept. of State)
P20000071547	
·	(Document Number of Corporation (if known)
Pursuant to the provision	ns of section 607-1006. Florida Statutes, this <i>Florida Profit Corneration</i> adopts the fo

pts 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." 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 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; 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.

Example: X Change PT John Doe X Remove ٧ Mike Jones X Add SVSally Smith Type of Action Title Address Name 1 (Check One) VPCLAUDIO F TOLENTINO SR 5109 FLEMING RD 1) ____ Change PLANT CITY, FL 33565 ____ Add Remove MIGUEL A TOLENTINO FRANCO 5109 FLEMING RD Change PLANT CITY, FL 33565 ___ Add Remove __ Change ____ Add __ Remove 4) ____ Change Add Remove 5) ____ Change ____ Add Remove 6) ____ Change ___ Add Remove

If amending or adding additional A Attach additional sheets, if necessary	
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<u>. </u>	
	<u>. </u>
If an amendment provides for an ex	exchange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	mendment if not contained in the amendment itself:)
	
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	11/09/2020	
	-	_, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
Note: If the date inserted in this block doe document's effective date on the Departmen	is not meet the applicable statutory filing requirements, this date will tof State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by action was not required.	the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient to	the shareholders. The number of votes cast for the amendment(s) for approval.	
	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):	
"The number of votes cast for the a	mendment(s) was/were sufficient for approval	
by	voting group)	
	voting group)	
Dated Nov 09 2020	<u> </u>	
Signature		
(By a director, p selected, by an i	resident or other officer – if directors or officers have not been not not portion – if in the hands of a receiver, trustee, or other court iary by that fiduciary)	_
MIGUE	L A TOLENTINO FRANCO	
	(Typed or printed name of person signing)	
PRESID	DENT	
	(Title of person signing)	