P21000005071

(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOI	RATION: MENDEZ BROTH	ERS DRYWALL SERVIC	E INC
DOCUMENT NUMI	BER: P21000005071		<u> </u>
	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	DANIEL MENDEZ		
		Name of Contact Person	
	MENDEZ BROTHERS DRY	WALL SERVICE INC	
		Firm/ Company	
	2719 SW 112TH ROAD		
		Address	
	WEBSTER, FL 33597		
		City/ State and Zip Code	>
For further informatio	erman address: (to be us	sed for future annual report	nomeationy
DANIEL MENDEZ		at (_)
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

MENDEZ BROTHERS DRYWALL SERVICE INC

FILED

(<u>Name of Corporation</u>	n as currently filed with 282 Hilorida Dept. of	State)
P21000005071	Score-	7:43
•	ent Number of Corporation (ALAHESSEE	TATE
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopt	The following amendment(s)
A. If amending name, enter the new name of the cor	rporation:	
		The new
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A professional corporation name	the abbreviation "Corp.," must contain the word
B. Enter new principal office address, if applicable:		-
(Principal office address MUST BE A STREET ADD)	<u>RESS</u>)	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
		<u> </u>
D. If amending the registered agent and/or registered		of the
new registered agent and/or the new registered o	office address:	
Name of New Registered Agent		
	(Florida street address)	
10 N 1 100 111	121	lorida
New Registered Office Address:	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi		
I hereby accept the appointment as registered agent. I	am familiar with and accept the obligations of	the position.
Signa	ture of New Registered Agent, if changing	
•		
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 6	07 0120 (11) (c) F S	
- The amendment(a) is are being med paradam to a. o	~ · · · · · · · · · · · · · · · · · · ·	

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	ı Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	JOSE A MENDEZ	2719 SW 112TH ROAD
X Add			WEBSTER, FL 33597
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			,
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
	-	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	

The date of each amendment(s) adopt date this document was signed.	ion: $02/25/2$, if other than the
Effective date if applicable:			
	(no more than 90 days after	amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart		ory filing requirements, this date will	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were adopted action was not required.	I by the incorporators, or board of dir	rectors without shareholder action and	shareholder
The amendment(s) was/were adopted by the shareholders was/were suffici		f votes cast for the amendment(s)	
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting h voting group entitled to vote separa		
"The number of votes east for t	the amendment(s) was/were sufficien	it for approval	
by		·	
selected, by	(voting group) 100 100 100 100 100 100 100 100 100 10		 -
	(Typed or printed name of pe	Tson signing)	
E	(Title of person signing)		