P21000005389

(Re	questor's Name)	
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SECRETARY OF STAT

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Alpha Construction	n, Remodeling and Renovat	tion	
DOCUMENT NUM				
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		1
	Sergio I. Gomez			1
		Name of Contact Persor	1	
	Alpha Construction, Remode	ling and Renovation		
		Firm/ Company		_
	5881 Ne 18th Ave Apt 1			
	*****	Address		
	Fort Lauderdale/ FL 33334			
		City/ State and Zip Code	2	!
	Alpha-construction@outlook	.com		
	E-mail address: (to be us	sed for future annual report	notification)	
				j :
For further informati	on concerning this matter, pleas	se call:		1
Sergio I Gomez		954 at (_) 643-6497	
Namo	of Contact Person	Arca Co	de & Daytime Telephone Numb	oer [
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	ָר ב
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
An Di ^c P.C	neiling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	}

2021 FEB 22 AM 11: 1:

Articles of Amendment to Articles of Incorporation of

Alpha Construction, Remodeling and Renovation Inc.

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

P2100005389	. or state)
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> ad its Articles of Incorporation:	lopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" of "lnc.," or Co" or the designation "Corp," "Inc," or "Co". A professional corporation no "chartered," "professional association," or the abbreviation "P.A."	or the abbreviation "Corp.,"
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 new registered agent and/or the new registered office address: Name of New Registered Agent	2021 FEB 22 AH II: 19 SECRETARY OF STATE TALLAHASSEE, FL of the
	
(Florida street address) New Registered Office Address:	. Florida
(City)	(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	s of the position.
Signature of New Registered Agent, if changing	,
Check if applicable	

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	Doc	
X Remove	<u>V</u> <u>Mike</u>	: Jones	ĺ
X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Sergio Ismael Gomez Jr	5881 ne 6th ave Apt 1
Add			Fort Lauderdale FL 33334
x Remove			
2) Change	P/Owner	Sergio Ismael Gomez	5881 ne 6th ave Apt 1
X Add			Fort Lauderdale FL 33334
Remove 3) Change			
Add			
Remove			ī
4) Change			_
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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The date of each amendment(s) at late this document was signed.	-	, if other than the
	2021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b locument's effective date on the De	ock does not meet the applicable statutory filing requirements, this dipartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder act	ion and shareholder
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment ficient for approval.	(s)
must be separately provided for "The number of votes cast	roved by the shareholders through voting groups. The following staten each voting group entitled to vote separately on the amendment(s): For the amendment(s) was/were sufficient for approval	uent
President by	· · · · · · · · · · · · · · · · · · ·	
	(voting group)	
2/19/2021 Dated		
Signature	Son Attached	
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other could fiduciary by that fiduciary)	
	Sergio I. Gomez	
	(Typed or printed name of person signing))
	President/Owner	l
	(Title of person signing)	

I , Sergio I. Gonez acknowledge the form

I am Filing. I also acknowledge that

Included in the envelope is a check

Included in the envelope is a check

made out to florida perartment of State |

made out to florida perartment of state |

for a total of \$35.

Sergio Gonez 2-19-2021