Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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(((H24000117072 3)))



H240001170723ABCY

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To:

Division of Corporations

Fax Number

: (850)617-6380

from:

Account Name : TAX S PRO CORP Account Number : I20200000147 Phone : (786)307-2733

Fax Number : (954)420-7118

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: INFO (2) + ILKS PRO. COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN JMC REMODELING AND NEW CONSTRUCTION CORP

Certificate of Status	0
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Page Count	06
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A. RAMSEY

APR - 1. 2024

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NIC Amer

COVER LETTER

TO: Amendment Se Division of Cor					
NAME OF CORPO	DRATION: JMC REMODELI	NG AND NEW CONSTRU	JCTION CORP		
	1BER: P21000015965				
	s of Amendment and fee are su	bmitted for filing.			
Please return all com	espondence concerning this ma	tter to the following:			
	ANWAR PUELLO				
		Name of Contact Person	n		
	TAX S PRO CORP				
	Firm/ Company				
	8030 PINES BLVD				
	Address				
	PEMBROKE PINES FL 33024				
		City/ State and Zip Cod	e		
	INFO@TAXSPRO.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, plea	se call:			
ANWAR PUELLO		at (⁷⁸⁶	3072733		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check t	for the following amount made	payable to the Florida Dep	artment of State:		
\$ 35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ailing Address	Street Address			
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Check if applicable

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

Articles of Amendment to Articles of Incorporation of

From: +19544207118 (TAX S PRO)

FILED

2024 MAR 29 AM 14: 56

	10 11 141 1 2 4 401
(Name of Corporation:	as currently filed with the Florida Dept. of.State)
221000015965	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida State Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corp.	oration:
IMC REMODELING CORP	The new
	pration," "company," or "incorporated" or the abbreviation "Corp.," r "Co". A professional corporation name must contain the word
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
). If amending the registered agent and/or registered new registered agent and/or the new registered offi	
new registered agent and/or the new registered offi	ce address:
new registered agent and/or the new registered offi	

To: +18506176380

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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change		_ 		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		-		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Damova				

∄ 2 of 6

	03/29/2024	
The date of each amendment		, if other than the
date this document was signed.		
	03/29/2024	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
	his block does not meet the applicable statutory filing requirements, this da be Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder acti-	on and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes east for the amendment(ere sufficient for approval.	s)
	e approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	•	
~, <u></u>	(voting group)	
03/29/ Dated	2024	
Signature	Kintenty QUIDE	
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other compointed fiduciary by that fiduciary)	1
	KIMBERLY QUIROZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	