# Palooo038474

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2024 NOV 13 PM 5: 01 SECRETARY OF STATE TALLAHASSEE, FL



#### COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: ED BROTHERS SE	ERVICES CORP			
DOCUMENT NUM	1BER: P21000028474				
	es of Amendment and fee are sub	omitted for filing.			
Please return all corr	respondence concerning this mat	ter to the following:			
	RAIDEL DURO RODRIGUE	ZZ			
		Name of Contact Person	- "	<del></del>	
	ED BROTHERS SERVICES CORP				
		Firm/ Company		<del></del>	
	2716 24TH ST W				
		Address			
	LEHIGH ACRES, FL 33971				
	City/ State and Zip Code				
				7924   SECI	
	E-mail address: (to be us	ed for future annual report	notification)	NOV RET/	
For further informat	ion concerning this matter, pleas	se call:		1024 NOV 13 PH 5: 01 SECRETARY OF STAT TALLAHASSEE, AL	
Noraimy Cabrera		305 at (	733-7783	F. F. 57	U
Nam	e of Contact Person		de & Daytime Telephone Nun	mber PAT C	
Enclosed is a check	for the following amount made	payable to the Florida Depa	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)		

### **Mailing Address**

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

## Street Address

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

ED	RROTHERS	SERVICES	CORP

ED BROTHERS SERVICES CORP				
(Name_o	f Corporation as currently	filed with the Florida Dept.	of State)	
P21000028474				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	Florida Profit Corporation add	pts the following ame	ndment(s) to
A. If amending name, enter the new na	me of the corporation:			
			The	new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Corchartered," "professional association,"	Corp," "Inc." or "Co". A	ompany," or "incorporated" o professional corporation na	r the abbreviation "Come must contain the	orp.," word
D. P. Avis is a spin size to office and decor	if applicable:	2003 NW 17TH AVE		
B. Enter new principal office address, (Principal office address MUST BE A S		CAPE CORAL, FL 33993		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2003 NW 17TH AVE	SEO	2024
<u> </u>		CAPE CORAL, FL 33993		NOV.
			ARY ARY	<u> </u>
D. If amending the registered agent ar new registered agent and/or the new			ARY OF ST	2024 NOV 13 PH 5: 01
Name of New Registered Agent	EUDES DELGADO JR,	•		0
(manic v) rear regimerea rigen	2003 NW 17TH AVE	-		
	(Florida str	vet address)		
New Registered Office Address:	CAPE CORAL		Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	hanging Registered Agents	i with and accept the oblivations	of the position.	
		una decept the oringations	2 P	

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	V	RAIDEL DURO RODRIGUEZ	2716 24TH ST W
Add			LEHIGH ACRES, FL 33971
Remove			
2) Change	P	EUDES DELGADO JR.	2003 NW 17TH AVE
X Add			CAPE CORAL FL 33993
Remove 3) Change			- <del> </del>
Add			AHAS
Remove			SSEE S
4) Change			TA C
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

TITO

• • •	10/23/2024	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date volument of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption was not required.	oted by the incorporators, or board of directors without shareholder action a	and shareholder
☐ The amendment(s) was/were adopty the shareholders was/were sufficiently.	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	.**	
	(voting group)	
10/23/2024 Dated		
Signature X		207 SE
a di selected	coor president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary)	2024 NOV 13 PO SECRETARY OF TALLAHASS
I	RAIDEL DURO RODRIGUEZ	13 PM ARY OF NHASSE
-	(Typed or printed name of person signing)	— EE, SI
1	PRESIDENT	TATE FOR
-	(Title of person signing)	