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.

(((H22000068340 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LI

: LICENSES & PERMITS LLC

Account Number : I20210000155

: (305)226-8727

Phone Fax Number

: (305)226-8767

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

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COR AMND/RESTATE/CORRECT OR O/D RESIGN MICHELL&M REMODELING SERVICES CORP.

CORETARY G. STATI

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COVER LETTER

IO:	Amenoment Section			
	Division of Corporations			

NAME OF CORPO	RATION: MICHELL&M RE	MODELING SERVICES	CORP		
	BER: P21000037353	, <u> </u>			
	of Amendment and fee are su	bmitted for filing.	<u> </u>		
	spondence concerning this ma				
	TAKENA DOMBELIA				
	LUCIA ESTRELLA				
		Name of Contact Person	1		
	LICENSES & PERMITS LLC				
		Firm/Company			
	8300 WEST FLAGLER STR	EET SUTTE 114			
		Address			
	MIAMI, FLORIDA				
		City/ State and Zip Code	ę		
	ACRUZ.ACCURATE@GM	AIL.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
LUCIA ESTRELLA		at (226-8727		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	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)		
	iling Address		Address		
	endment Section ision of Corporations		ment Section n of Corporations		
	. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Tall	ahassee, FL 32314				

Articles of Amendment to Articles of Incorporation of

MICHELL&M REMODELING SERVICES CORP					
(Name of Corporation as	currently filed with the Florida D	ept. of State)	-	_
P21000037353					
(Document	Number of Corporation (if known)		_		
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation	a adopts the fi	ollowing am	endme	ent(s) to
A. If amending name, enter the new name of the corpor OSMAR & M SERVICES CORP	ration;		The	new	
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	"Co". A professional corporation		reviation "C	Corp.,"	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	22)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				2022 FEB b	71
			HASSEE, F	3 2	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		ame of the	THE STATE	<u>5</u> 3	
Name of New Registered Agent	<u> </u>				
a	Florida street address)				
New Registered Office Address:	(City)	, Florida	(Zip Code)		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am j	familiar with and accept the obligation		ition.		
Signature	of New Registered Agent, if changing	?			
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.01	120 (11) (e), F.S.				

Example:

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	KL	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) Change	VP	OSMAR MARTINEZ	1891 NW 68 STREET	
X Add			MIAMI, FLORIDA 33147	
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	
	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exchiprovisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
A	
4	
A	
A	

	02/22/2022	
The date of each amendment(s)	ndoption:	, if other than the
late this document was signed.		
	72/2022	
Effective date <u>if applicable</u> :	(no more than 90 days after amendmen	t file date)
Note: If the date inserted in this	block does not meet the applicable statutory filing re	couirements, this date will not be listed as the
document's effective date on the I		
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as action was not required.	lopted by the incorporators, or board of directors without	out shareholder action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	lopted by the shareholders. The number of votes cast fufficient for approval.	for the amendment(s)
must be separately provided fo	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the each	amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approve	al
by	(voting group)	'
02/22/202 Dated Signature	Leveller	
select	tirector, president or other officer – if directors or officed, by an incorporator – if in the hands of a receiver, to steel fiduciary by that fiduciary)	
	BERTA MARTINEZ	
	(Typed or printed name of person signing))
	PRESIDENT	
	(Title of person signing)	