P21000039534

(Reque	estor's Name)
(Addre	ss)	-
	. <u>.</u>	
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10:10	1-1-G: (D)-	
(City/S	tate/Zip/Pho	ne #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Na	ame)
(Docur	ment Numbe	r)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: S&S REMODELII	NG CONTRACTORS PB I	NC
DOCUMENT NUMB	ER: P21000039 534		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	STEPHANIE AGUIRRE		
-		Name of Contact Person	n
	S&S REMODELING CONT	RACTORS PB INC	
•		Firm/ Company	
	1861 ABBEY RD	, ,	
-	.	Address	
	WEST PALM BEACH, FL	33415	
-		City/ State and Zip Cod	e
:	STEPHANIEA@ESTOYOT	A.COM	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	eo call·	
Tot farther information	concerning this matter, piea.	se cuii.	
STEPHANIE AGUIRE	RE	at (846-9291
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

S&S REMODELING CONTRACTORS PB INC.

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

(Name of Corporation	on as currently	filed with the F	lorida Dept. of Sta	te)		
P21000039534	<u> </u>			<u></u>)		
(Docum	nent Number of	Corporation (if k	nown)	<u> </u>		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this F	Florida Profit Co	rporation adopts th	e following	g amend	ment(s) to
A. If amending name, enter the new name of the co	orporation:					
					The n	ew
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association." or the abbre	" or "Co". A					
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	ii DRESS)			···-		_
			····		~	_
				_ <u>₹</u>	02_	
C. Enter new mailing address, if applicable:				LL/ RET	YAH	
(Mailing address MAY BE A POST OFFICE Bo	<u>(X</u>)					
				- SS - CS - CS - CS - CS - CS - CS - CS	סר	jn
			•		N	_
D. If amending the registered agent and/or register new registered agent and/or the new registered of the n		ess in Florida, er	iter the name of th	<u>e</u> [7]	œ	
·	Office address:					
Name of New Registered Agent						
	del de				-	
	(Florida strei	et aaaress)				
New Registered Office Address:		City)	, Florid	a(Zip C	Coda)	-
	(,	City		(z.p. C	arac)	
New Registered Agent's Signature, if changing Regi						
I hereby accept the appointment as registered agent.	I am familiar wi	ith and accept the	obligations of the	position.		
Signa	iture of New Reg	gistered 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)

Example:

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	<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) Change	VP	SANTIAGO ROLDAN	1861 ABBEY RD
XX Add	-		WESST PALM BEACH
Remove			FL 33415
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			***
Remove			

amending or adding addition attach additional sheets, if nece.	ssary). (Be spec	rific)			
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an amendment provides for provisions for implementing t	<u>an exchange, recl</u> he amendment if	lassification, or o	ancellation of iss	itself:	
(if not applicable, indicate	N/A)	nor contained in	the amendment	TESCHI.	
	· · · · · · · · · · · · · · · · · · ·				
				<u> </u>	

The date of each amendment(s) adoption: _______, if other than the date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) Dated (By a director, president or other officer – if directors or officers have not been Signature selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) STEPHANIE AGUIRRE (Typed or printed name of person signing) PRESIDENT

(Title of person signing)