121000046631

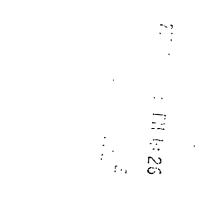
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRECISION & FI	NISH BUILDING,INC		=							
DOCUMENT NUN	IBER: P21000046631	· · · · · · · · · · · · · · · · · · ·		_							
	s of Amendment and fee are st	abmitted for filing.									
Please return all corr	espondence concerning this ma	atter to the following:									
	Carlos Montes De Oca										
	Name of Contact Person										
	PRECISION & FINISH BUILDING,INC										
	Firm/ Company										
	10880 Cameron Ct Apt 102										
Address											
Davie,Fl 33324											
City/ State and Zip Code											
celsoic@aol.com											
	E-mail address: (to be u	sed for future annual report	notification)								
For further information	on concerning this matter, plea	se call: at (479-7248								
Name	of Contact Person	at (Area Coo) le & Daytime Telephone Nu	mber							
Enclosed is a check f	or the following amount made		•								
S35 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)								
Am Div P.C	iling Address endment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, F1, 32303									

Articles of Amendment to Articles of Incorporation of

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	currently filed with the Fl	orida Dept. of State)
21000046631		
(Document N	lumber of Corporation (if kn	iown)
rsuant to the provisions of section 607.1006, Florida Statu Articles of Incorporation:	ites, this <i>Florida Profit Corp</i>	noration adopts the following amendment(s)
If amending name, enter the new name of the corpora	ation:	
RECISION & FINISH LX.INC		The new
me must be distinguishable and contain the word "corpora nc.," or Co.," or the designation "Corp," "Inc," or " hartered," "professional association," or the abbreviation	"Co". A professional corp	rporated" or the abbreviation "Corp."
Enter new principal office address, if applicable:	N/A	
rincipal office address MUST BE A STREET ADDRESS	<u>S</u>)	
Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		<u> </u>
		<u> </u>
		
If amending the registered agent and/or registered off new registered agent and/or the new registered office	<u>fice address in Florida, ent</u> address:	• • • • • • • • • • • • • • • • • • • •
N/A		10 Page 10 Pag
Name of New Registered Agent		
- dE	lorida street address)	
N// A	ion was sireer awaress;	
New Registered Office Address: 1878		, Florida (Zip Code)
	(City)	(2.02 \ .002)

Check if applicable \Box 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)

Example:

Please note the officer/director title by the first letter of the office title:

P - President; V^{\pm} Vice President; T^{\pm} Treasurer; S - Secretary; D^{\pm} Director; TR - Trustee; C^{\pm} - Chairmon or Clerk; CEO \pm Chief Executive Officer; CEO - 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>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			. ,
2) Change			
Add			
Remove Change			
Add			
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Remove			

		
		
		
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		•
		- T-1
		:
		
	1	C)
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,		
provisions for implementing the amendment if not contained in the amendment itself:		
(if not applicable, indicate N/A)		
/A		

• . .

	04/22/2024		
The date of each amendment(s) adopti	on:		_, if other than the
date this document was signed.			
Effective date <u>if applicable</u> :			·
	tno more than 90 days o	after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departr		atutory filing requirements, this date will r	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
■ The amendment(s) was/were adopted action was not required.	by the incorporators, or board o	f directors without shareholder action and s	hareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie		er of votes cast for the amendment(s)	
☐ The amendment(s) was/were approve must be separately provided for each			
"The number of votes cast for th	he amendment(s) was/were suffi	cient for approval	
			5 7
by	(voting group)	 ;"	-
	croning groups		
Dated <u>04~27</u>	-2024		>
4	<i></i>	٠.	
Signature	Attaille 1/2 -		
		directors or officers have not been . : =	_ Lの
		of a receiver, trustee, or other court	01
appointed fi	duciary by that fiduciary)		
	Carlos Montes	De Oca	
	(Typed or printed name o	f person signing)	
	Tresident.		
	(Title of person signing)		