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FILLU 2022 JAN 31 AM 9: 2 SECRETARY OF STA

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: EAA PLASTERIN	CORP	
DOCUMENT NUMB			
	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	iter to the following:	
	ELMES A. ALEMAN		
-		Name of Contact Persor	1
	EAA PLASTERIN CORP		
	,	Firm/ Company	
	5521 NW 10TH AVE		
-		Address	
	MIAMI FL 33127		
-		City/ State and Zip Code	<u> </u>
	JV261107@HOTMAIL.COM	A	
	•	ed for future annual report	notification)
		·	·
For further information	concerning this matter, pleas	se call:	
ELMES A ALEMAN		786 at t	201-5379
Name of 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:
■ \$35 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)
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 of

FILED

EAA PLASTERIN CORP

2022 JAN 31 AM 9: 27

(Name o	of Corporation as curre	ently filed with the Flori	ida Dept. of State) SEURE IARY OF STATE TALLAHASSEE, FL
P21000058511			TALLAHASSEE
	(Document Number	er of Corporation (if know	vn)
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, t	his <i>Florida Profit Corpo</i> i	ration adopts the following amendment
A. If amending name, enter the new n	ame of the corporation	<u>:</u>	
ALEMAN STUCO CORP			The new
name must he distinguishable and contain "Inc.," or Co.," or the designation "C "chartered." "professional association."	lorp," Inc." or "Co".	. A professional corpor	orated" or the abbreviation "Corp.,"
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
			<u> </u>
			
C. Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST	<u>OFFICE BON</u>)		
D. If amending the registered agent ar	id/or registered office a	iddress in Florida, enter	the name of the
new registered agent and/or the ne-	w registered office addi	ress:	
Name of New Registered Agent	ELMES A ALEMN		
	5521 NW 10TH AVE		
	(Florida	a street address)	
New Registered Office Address:	MIAMI		, Florida 33127
		(Cuy)	(Zip Code)
New Registered Agent's Signature, if c			
I hereby accept the appointment as regist	tered agent Lam famili	iar with and accept the ol	oligations of the position.
	1001		
	118 11/		
	* LX LMUJ	w Registered Agent, if ch	·maina
	ingrature of Ne	w negimered agein, if the	antenit

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 Doc 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 Doc, 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	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
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			<u></u> .
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)			
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f an amendment provides for an excl	nange, reclassification,	or cancellation of i	ssued shares.	
<u>provisions for implementing the ame</u>	ndment if not containe	d in the amendmer	ıt itself:	
(if not applicable, indicate N/A)				
				<u> </u>
	·····			

•

	(s) adoption:	, if other than the
date this document was signed Effective date if applicable:	01/26/2022	
r, nective date <u>if applicable</u> .	ino more than 90 days after amendment file o	kitej
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requires he Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sha	reholder action and shareholder
	re adopted by the shareholders. The number of votes east for the ere sufficient for approval.	: amendment(s)
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The foll and for each voting group entitled to vote separately on the amend	owing statement Iment(s).
"The number of vote	cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
01/26 Dated	/2022	
Dated	TE 1	
Signature	iv a director, president or other officer – if directors or officers h	nya nat haan
	elected, by an incorporator – if in the hands of a receiver, trustee	
	opointed fiduciary by that fiduciary)	
	ELMES A. ALEMAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	