## P21000063327

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| PICK-UP WAIT                            | MAIL         |
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| Special Instructions to Filing Officer: |              |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF COR                                                                                    | PORATION: IVY DRYWALL F                       | REMODELING INC                                                     |                                                                                                           |  |  |
|------------------------------------------------------------------------------------------------|-----------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--|--|
|                                                                                                | UMBER: P21000063327                           |                                                                    |                                                                                                           |  |  |
| The enclosed Arti                                                                              | cles of Amendment and fee are su              | bmitted for filing.                                                |                                                                                                           |  |  |
| Please return all c                                                                            | orrespondence concerning this ma              | tter to the following:                                             |                                                                                                           |  |  |
|                                                                                                | YESSENIA MALDONADO                            |                                                                    |                                                                                                           |  |  |
|                                                                                                | Name of Contact Person                        |                                                                    |                                                                                                           |  |  |
|                                                                                                | IVY DRYWALL REMODELING INC                    |                                                                    |                                                                                                           |  |  |
|                                                                                                | Firm/ Company                                 |                                                                    |                                                                                                           |  |  |
|                                                                                                | 7696 SW 4 PL                                  |                                                                    |                                                                                                           |  |  |
|                                                                                                |                                               | Address                                                            |                                                                                                           |  |  |
|                                                                                                | NORTH LAUDERDALE FL                           | 33068                                                              |                                                                                                           |  |  |
|                                                                                                |                                               | City/ State and Zip Cod                                            | e                                                                                                         |  |  |
|                                                                                                |                                               |                                                                    |                                                                                                           |  |  |
|                                                                                                | Famail address: (to be us                     | ed for future annual report                                        | notification)                                                                                             |  |  |
|                                                                                                | is man address. (to be as                     | ed for factic timed report                                         | notification,                                                                                             |  |  |
| For further inform                                                                             | nation concerning this matter, pleas          | se call:                                                           |                                                                                                           |  |  |
| YESSENIA MAI                                                                                   | DONADO                                        | at (                                                               | 281-4350                                                                                                  |  |  |
| Name of Contact Person                                                                         |                                               | Area Co                                                            | de & Daytime Telephone Number                                                                             |  |  |
| Enclosed is a chec                                                                             | ck for the following amount made j            | payable to the Florida Dep                                         | artment of State:                                                                                         |  |  |
| S35 Filing Fe                                                                                  | e □\$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)                      |  |  |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |                                               | Amend<br>Division<br>The C<br>2415 P                               | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303 |  |  |

## Articles of Amendment to

Articles of Incorporation of

FILED

IVY DRYWALL REMODELING INC (Name of Corporation as currently filed with the Florida Dept of Stat 29 P21000063327 (Document Number of Corporation (if known) SSF Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co..." or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (Cuv) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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)

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                      | $\underline{V}$ | Mike Jones               |                           |
| X Add                         | <u>sv</u>       | Sally Smith              |                           |
| Type of Action<br>(Check One) | Title           | <u>Name</u>              | Address                   |
| 1) Change                     | VP              | JOSE A MALDONADO JIMENEZ | 7696 SW 4 PL              |
| X Add                         |                 |                          | NORTH LAUDERDALE FL 3306: |
| Remove                        |                 |                          |                           |
| 2) Change                     |                 |                          |                           |
| Add                           |                 |                          |                           |
| Remove 3 ) Change             |                 |                          |                           |
| Add                           |                 |                          |                           |
| Remove                        |                 |                          |                           |
| 4) Change                     |                 | _                        |                           |
| Add                           |                 |                          |                           |
| Remove                        |                 |                          |                           |
| 5) Change                     | <del></del>     | _                        |                           |
| Add                           |                 |                          |                           |
| Remove                        |                 |                          |                           |
| 6) Change                     |                 | _                        |                           |
| Add                           |                 |                          |                           |
| Remove                        |                 |                          |                           |

|            | nding or adding addition addition additional sheets, if neces. | sary). (Be specific)  |                        |                |  |
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| ı <i>c</i> |                                                                |                       |                        | 6 :            |  |
| provis     | nendment provides for a<br>ions for implementing th            | he amendment if not o | contained in the ame   | ndment itself: |  |
| (ij        | not applicable, indicate <i>\text{\gamma}</i>                  | V/A)                  |                        |                |  |
|            |                                                                |                       |                        |                |  |
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|                                                                                     | JANUARY 5, 2022                                                                                                           |                                            |
|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|
| The date of each amendment(s) ac                                                    | loption:                                                                                                                  | , if other than the                        |
| date this document was signed.                                                      | HADV 5 2622                                                                                                               |                                            |
| Effective date if applicable:                                                       | UARY 5, 2022                                                                                                              |                                            |
| <u></u>                                                                             | (no more than 90 days after amendment file d                                                                              | ate)                                       |
| <b>Note:</b> If the date inserted in this bl<br>document's effective date on the De | lock does not meet the applicable statutory filing requiren partment 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/were ado action was not required.                            | pted by the incorporators, or board of directors without sha                                                              | reholder action and shareholder            |
| ☐ The amendment(s) was/were ado<br>by the shareholders was/were su                  | pted by the shareholders. The number of votes cast for the fficient for approval.                                         | amendment(s)                               |
|                                                                                     | roved by the shareholders through voting groups. The followard voting group entitled to vote separately on the amendates. |                                            |
| "The number of votes cast                                                           | for the amendment(s) was/were sufficient for approval                                                                     |                                            |
| by                                                                                  | ."                                                                                                                        |                                            |
| •                                                                                   | (voting group)                                                                                                            |                                            |
| Dated<br><b>X</b> Signature                                                         | 1-05-2022<br>Yessen Williams                                                                                              |                                            |
| (By a di                                                                            | rector, president or other officer – if directors or officers ha                                                          | ive not been                               |
|                                                                                     | l, by an incorporator – if in the hands of a receiver, trustee,                                                           |                                            |
| appoint                                                                             | ed fiduciary by that fiduciary)                                                                                           |                                            |
|                                                                                     | YESSENIA MALDONADO                                                                                                        |                                            |
| •                                                                                   | (Typed or printed name of person signing)                                                                                 |                                            |
|                                                                                     | President                                                                                                                 |                                            |
|                                                                                     | (Title of person signing)                                                                                                 |                                            |