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R. W. ST. 22-4

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: AFP Remodeling	Ine			
	1BER: P21000067254				
	es of Amendment and fee are su	ibmitted for filing.			
Please return all corr	respondence concerning this ma	atter to the following:			
	Arfen F Padilla Gonzalez				
	Name of Contact Person				
	AFP Remodeling Inc				
	Firm/ Company				
	3500 University Blvd N Apt 201				
	Address				
	Jacksonville, FL 32277				
		City/ State and Zip Cod	·		
	oficinazorro@gmail.com				
	E-mail address: (to be u	sed for future annual report	notification)		
For further informat	ion concerning this matter, plea	se call:			
Arlen F Padilla Gonzalez		904 at (521-5761		
Name	Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	ortment 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)		
Mailing Address		Street Address			
	mendment Section	Amendment Section			
	vision of Corporations O. Box 6327	Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

AFP Remodeling Inc		
(Name of Corporation	as currently filed with t	he Florida Dept. of State)
P21000067254		
(Documen	I Number of Corporation	(if known)
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	tatutes, this <i>Florida Profi</i>	t Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corp	oration:	
name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp," "Inc," o "chartered," "professional association," or the abbrevia	or "Co". A professiona	The new "incorporated" or the abbreviation "Corp.," I corporation name must contain the word
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRI</u>	<u>ESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		a, enter the name of the
man ty it is region to high		
	(Florida street address)	
Van Barristan d (MV and Chiana		PL =: L
New Registered Office Address:	(Ciţy)	
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I are		ot the obligations of the position.
Signatur	re of New Registered Age.	nt, if changing
Check if and inchis		
Check if applicable		

 \square 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	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change	V.	Angel Ramiro Lanza Lopez	3500 University Blvd N Apt 201
X Add			Jacksonville, FL 32277
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Mtach additional sheets, if necess	ary). – (Be specifi	c)			
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<u> </u>					
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	<u>.</u>				
					
					
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an amendment provides for ar	i exchange, reclas	sification, or can	cellation of issued	shares,	
provisions for implementing the	amendment if no	ot contained in th	<u>e amendment itse</u>	<u>lf:</u>	
(if not applicable, indicate N	A)				

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. . .

	ndoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this document's effective date on the F	block does not meet the applicable statutory filing require epartment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without sl	hareholder action and shareholder
The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for thufficient for approval.	ne amendment(s)
	proved by the shareholders through voting groups. The for r each voting group entitled to vote separately on the amen	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
09/07/202 Dated	i 	
Signature <u>Al/</u>	en F. Padilla	
select	firector, president or other officer – if directors or officers ed, by an incorporator – if in the hands of a receiver, trustented fiduciary by that fiduciary)	have not been e, or other court
	Arlen F Padilla Gonzalez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	