## P2100069759

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:JA GLOBAL RENOVATIONS INC		
DOCUMENT NUMBER:	P21000069759	
The enclosed Articles of Amendment	and fee are submitted for filing.	
Please return all correspondence conc	erning this matter to the following:	
	JAY ROMERO	
<del></del>	Name of Contact Person	
	WILLIAMS&MORRIS, PC PELC	
	Firm/ Company	
	8004 NW 154TH STREET STE 646	
	Address	
	MIAMI LAKES, FL 33016	
City/ State and Zip Code		
	williamsmorrispa@hotmail.com	
E-mail add	dress: (to be used for future annual report notification)	
For further information concerning thi	is matter, please call: at ( 786 ) 256-6615	
Name of Contact Perso	at ()  Area Code & Daytime Telephone Number	
Enclosed is a check for the following	amount made payable to the Florida Department of State:	
	Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee the of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corpora		
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 323	14 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

## JA GLOBAL RENOVATIONS INC

to

(Name of Corporation as current	ntly filed with the Florida Dept.	of State)	
	21000069759		
(Document Number	r of Corporation (if known)		
Pursuant to the provisions of section 607.1006. Florida Statutes, the its Articles of Incorporation:	is <i>Florida Profit Corporation</i> ado	pts the following amendment(s	
A. If amending name, enter the new name of the corporation:			
	CONSTRUCTION INC	71 -	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.,	A professional corporation nan	The new the abbreviation "Corp.," ne must contain the word	
B. Enter new principal office address, if applicable:	18890 SW 25 COURT		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIRMAR, FL 33029		
		   202    SE	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18890 SW 25 COURT	TORREST -	
·	MIRAMAR, FL 3329	3 G	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent		of the & &	
(Florida :	street address)		
New Registered Office Address:	(Circ)	Florida(Zip Code)	
		,	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		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)

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.

Example:

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>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove  Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter chang (Be specific)			
	ine specificy			
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f an amendment provides for an each	ange reclassifica	tion or cancellat	ion of issued shar	*0¢
If an amendment provides for an exchange of a second provisions for implementing the appearance.	ange, reclassifica	tion, or cancellat	ion of issued shar	<u>'es,</u>
provisions for implementing the amer	ange, reclassifica idment if not con	tion, or cancellar tained in the am	ion of issued shar endment itself:	es,
If an amendment provides for an exchiprovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassifica adment if not con	tion, or cancellat tained in the am	ion of issued shar endment itself:	<u>'es,</u>
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The date of each amendment(s) addate this document was signed.	loption:	, if other than the
Effective date <u>if</u> applicable:		
	(no more than 90 days after amendment fil	e date)
<b>Note:</b> If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requipartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without	shareholder action and shareholder
■ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the ficient for approval.	he amendment(s)
	roved by the shareholders through voting groups. The fa- each voting group entitled to vote separately on the ame	
"The number of votes east	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	/2024	
Signature		
(By a di selected	rector, president or other officer – if directors or officers, by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	
	CARLOS M PIRELA	
•	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

The date of each amendment(s) add	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this blo document's effective date on the Dep	book does not meet the applicable statutory filing requirement of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
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by		
,	(voting group)	
Dated5-1	-2024 Conly Tulu	
selected,	ector, president or other officer – if directors or officers by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	
	CARLOS PIRELA	
<del></del>	(Typed or printed name of person signing)	
	PRESIDENT	
_	(Title of person signing)	-