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2021 SEP 20 PM 3: 32

COVER LETTER

TO: Amendment Section

Division of Corpo	orations		•
NAME OF CORPOR	ration: <u>Pro - May</u>	Renovations	and Design core
DOCUMENT NUME	BER: <u>P210000</u> 7	7379	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
For further information	P10- 2090	Firm/ Company Address Miam; FL City/ State and Zip Code estocationand parent sed for future annual report	Are #1 33182
Diara	Caicedo	at (_ 30 5) 253- 7900
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	S43.75 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street. Suite 810 assee, FL 32303

Articles of Amendment

Articles of Incorporation of

Pro-Max Renova		esign Colp		
(<u>Name of</u>	f Corporation as currently t	filed With the Florida D	<u>Jept. of State</u>)	
	(Document Number of C	Corporation (if known)		-
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this <i>Fl</i> .	orida Profit Corporation	n adopts the following amend	dment(s) to
A. If amending name, enter the new na	me of the corporation:			
<u>·</u>			The i	new
name must be distinguishable and contain to "Inc.," or Co.," or the designation "Co "chartered," "professional association," of the designation is a contact of the contact	orp," "Inc," or "Co". A p or the abbreviation "P,A,"	npany," or "incorporate professional corporation	ed" or the abbreviation "Corp n name must contain the w	p., " sord
B. Enter new principal office address, it (Principal office address MUST BE A ST			· -	_
		<u> </u>		_
				_
C. Enter new mailing address, if applic	a bla			
(Mailing address MAY BE A POST O				<u></u>
			~? -23 53	
			, (.)	
				—
D. If amending the registered agent and		s in Florida, enter the	name of the	- 176E
new registered agent and/or the new		_	SSE P) i (
Name of New Registered Agent	Maximilian	M. Tower	မြိတ္ထုိယ္	U
-	2090 NW 1	33 Ave #1	32 FL	
New Registered Office Address:	Hiami		Florida 33182	
<u>New Registerea Office Address</u> :		ity)	, Florida <u>33182</u> (Zip Code)	_
New Registered Agent's Signature, if ch. I hereby accept the appointment as register	anging Registered Agent: red agent. I am familiar wib	h and accept the obligat	ions of the position.	
		_		
	M	stered Agent, if changin		
	Signature of New Regi	stered Agent, if changin	g	
Chack 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> <u>John D</u>	<u>oe</u>	
\underline{X} Remove	V <u>Mike J</u>	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	Co-president	Maximilian M. Towar	2090 NW 133 Are #1
Add			Miami FL 33182
Remove	1		
2) Kange Change	co-presiden	Ray G. Rodriguez	2090 NW 133 Are #
Add			Hiami FL 33182
Remove 3) Change	President	Max Tower	
Add			
Remove	. 1		
4) Change	President	<u> Leggie Podriguez</u>	
Add			
X Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
			 		
				•	
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	,				
					
					
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		<u> </u>			
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					-
f an amendmen	t provides for an exch	nange, reclassificat	ion, or cancellation (of issued shares,	
provisions for in	mplementing the ame	ndment if not cont	ained in the amendr	nent itself:	
(if not applic	cable, indicate N/A)				
			 		
 .					
<u></u> .					
		<u> </u>		<u>. </u>	
				•	

. . . .

The date of each amendment(s) acd date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :	9/7/2021 (no more than 90 days after amendment file dat	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requireme partment of State's records.	nts, 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.	opted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the at fficient for approval.	mendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendme	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
py	(voting group)	
	1 ,	
	2/13/2021	
Signature(By a di selected	rector/president or other officer – if directors or officers have l, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	
Signature(By a di selected	rector president or other officer – if directors or officers have I, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	
Signature(By a di selected	rector president or other officer – if directors or officers have I, by an incorporator – if in the hands of a receiver, trustee, or	
Signature(By a di selected	rector president or other officer – if directors or officers have I, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	