P21000083430

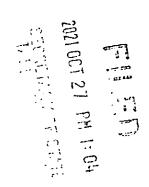
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(Address)
(Address)
(City/State/Zip/Phone #)
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(Document Number)
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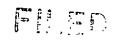
TO: Amendment Section Division of Corporations

Company of the second

NAME OF CORPO	RATION: TEAM DEMOLITI	ON MULTISERVICE CO	RP
	BER: P21000083430	<u> </u>	
	s of Amendment and fee are sul	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
	ELMER R GARCIA MAILL	0	
		Name of Contact Person	ı
	TEAM DEMOLITION MUL	TISERVICE CORP	
		Firm/ Company	
	12401 W OKEECHOBEE RI) LOT 450	
		Address	
	HIALEAH, FL 33018		
		City/ State and Zip Code	;
	tax.center.eeuu@gmail.com		
		sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
ELMER R GARCIA	MAILLO	786	661-9543 de & Daytime Telephone Number
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)
Ai Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 Illahassee, FL 32314	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



TEAM DEMOLITION MULTISERVICE CORP

2021 OCT 27 PM_1: 04

(Principal office address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent ELMER R GARCIA MAILLO NiA Cityy (City) (If known) (If	(Name o	of Corporation as curren	tly filed with the Florida Depteo	F State)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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) N/A 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: N/A ELMER R GARCIA MAILLO N/A	P21000083430			Military of Original
A. If amending name, enter the new name of the corporation: N/A The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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 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: N/A	·	(Document Number	of Corporation (if known)	
The new manner 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		1006, Florida Statutes, thi	s <i>Florida Profit Corporation</i> adop	ts the following amendment(s)
The new manner must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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: (Muiling 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	A. If amending name, enter the new na	ame 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	N/A			The new
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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 ELMER R GARCIA MAILLO	P. Enter non principal office address	if annlicable	N/A	
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(Chy) (Zip Code)	New Registered Office Address:	N/A	- ':	lorida
			<i>(Спу)</i>	(Ztp Code)
	New Registered Office Address:		, F	lorida
				t the position
	i nereny accept the appointment as regist	erea agent 1 am jamilia	r wan ana accept the ootigations of) ине рохинон.
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.		-04	<i>!</i>	
		Kall	/	
		Signature of New	Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c). 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	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	Р	ELMER R GARCIA MAILLO	12401 W OKEECHOBEE RD
Add			LOT 450
Remove			HIALEAH, FL 33018
2) Change	N/A	<u>N/A</u>	N/A
Add			
Remove 3) Change	N/A	N/A	N/A
Add			
Remove			
4) Change	N/A	N/A	N/A
Add			
Remove			
5) Change	N/A	N/A	N/A
Add			
Remove			
6) Change	N/A	N/A	N/A
Add			
Remove			

E. If amending or adding additional Arti- (Attach additional sheets, if necessary).	cies, enter change(s) nere: (Be specific)
N/A	
•	
·	
	· · · · · · · · · · · · · · · · · · ·
-	
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	
<u>-</u>	<u> </u>

•

	N/A	
The date of each amendment(s) adoption:	if other than the
date this document was signed.		
	10/14/2021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	tis block does not meet the applicable statutory filing requirements, this date to Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action	and shareholder
■ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by100% VOTES		
. ———	(voting group)	
10/14/2 Dated	2021	
sel	y a directory president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	ELMER R GARCIA MAILLO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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