## P22000011967

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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2022 MAR - 7 AM 9: 07 SECRETATION STATE TALL ANALOGY F. FI

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: STAR LIFT SCAP	FFOLDING INC			
DOCUMENT NUM	IBER: P22000011967				
	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	SENOZ ASIL				
		Name of Contact Person	1		
	STAR LIFT SCAFFOLDING INC				
	Firm/ Company				
	7950 NW 53RD STREET STE 337				
		Address	· · · · · · · · · · · · · · · · · · ·		
	MIAMI, FL, 33166				
		City/ State and Zip Cod			
	info@starliftscaffolding.com				
	<del>-</del>	sed for future annual report	notification)		
For further informate	ion concerning this matter, plea		270-1214		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made				
■ \$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)		
Mailing Address Amendment Section			Address ment Section		
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314			entre of Tallahassee		
		2415 î	V. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

STAR LIFT SCAFFOLDING INC 2022 MAR - 7 AM 9: 07 (Name of Corporation as currently filed with the Florida Dept. of State) P22000011967 (Document Number of Corporation (if known) 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: (Zip Code) (City) 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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	MELIKE BACAK	7950 NW 53RD STREET STE 337
Add X Remove			MIAMI, FL 33166
2) X Change	PV	SENOZ ASIL	7950 NW 53RD STREET STE 337
Add		_	MIAMI, FL 33166
Remove Change		_	
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change		_	_
Add			
Remove			
6) Change			
Add			
Remove			

	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
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f an ar	nendment provides for an exchange, reclassification, or cancellation of issued shares,	
provis	ions for implementing the amendment if not contained in the amendment itself:	
provis	ions for implementing the amendment if not contained in the amendment itself:  Input applicable, indicate N/A)	
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provis (if	ions for implementing the amendment if not contained in the amendment itself:  not applicable, indicate N/A)  [	

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The date of each amendment(s) late this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
(	(no more than 90 days after amendment fi	ile date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requiperatment of State's records.	firements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without	shareholder action and shareholder
The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes east for sufficient for approval.	the amendment(s)
must be separately provided f	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amount of the a	
_	•	,
by	(voting group)	
02/25/20 Dated Signature		
: selec	director.president or other officer – if directors or officer ted, by an incorporator – if in the hands of a receiver, trus inted fiduciary by that fiduciary)	
	SENOZ ASIL	
•	(Typed or printed name of person signing)	
•	PRESIDENT	
. 1	(Title of person signing)	