P22000019926

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MUR	ILLO HOME REMODE	LING INC			
DOCUMENT NUMBER: P22000019					
The enclosed Articles of Amendment a	nd fee are submitted for f	iling.			
Please return all correspondence concer	ming this matter to the fol	lowing:			
OCTAVIO MU	RILLO				
	Name of Contact Person				
MURILLO HOM	ME REMODELING INC				
	Firm/	Company			
2700 RANCH F	IOUSE RD APT 2				
Address					
WEST PALM B	EACH FL. 33406				
City/ State and Zip Code					
roxmsan22@gm	ail.com				
E-mail addr	ess: (to be used for future	annual report no	otification)		
For further information concerning this	matter, please call:				
OCTAVIO MURILLO	a:	914	258-5787		
Name of Contact Persor		Area Code	& Daytime Telephone Number		
Enclosed is a check for the following ar	nount made payable to th	e Florida Depart	ment of State:		
■ \$35 Filing Fee □\$43.75 Fi Certificate	of Status Certified	Copy al copy is	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassec

Articles of Amendment

FILED O

Articles of Incorporation			- IJ
	of	2022 AUG -1	PM o =
MURILLO HOME REMODELING INC		SECRE TARY	rn 2: 53
(Name of Corpor	ation as currently filed with the Florie	da Dept. of State)	3r, -
22000019926			• 11
(Doc	cument Number of Corporation (if know	vn)	
ursuant to the provisions of section 607.1006, Flor s Articles of Incorporation:	rida Statutes, this Florida Profit Corpor	ration adopts the follow	ving amendment(
. If amending name, enter the new name of the	corporation:		
			The new
ame must he distinguishable and contain the word Inc.," or Co.," or the designation "Corp," "In chartered," "professional association," or the abl	c," or "Co". A professional corpor	orated" or the abbrevio ation name must con	ition "Corp" tain the word
Enter new principal office address, if applical		*******	
Principal office address <u>MUST BE A STREET A</u>	<u>DDRESS</u>)		
	-		

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	PAVI		
(Mining university DE A FOST OF FICE I			
			
If amonding the maintain description to			
If amending the registered agent and/or registered agent and/or the new registered	ed office address:	the name of the	
· ·			
Name of New Registered Agent			
	-		
	(Florida street address)		
New Registered Office Address:	(Florida street address)	. Florida	

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.

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)

Add

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 Doc X Remove $\underline{\mathbf{v}}$ Mike Jones X Add SV Sally Smith Type of Action Title Name 1 Address (Check One) VP **ROXANA M SANCHEZ** 2700 RANCH HOUSE RD APT 2 1) ____ Change **WEST PALM BEACH FL 33406** Add Remove **ROXANA M SANCHEZ** 2700 RANCH HOUSE RD APT 2 2) ____ Change WEST PALM BEACH FL 33406 Add _ Remove 3) ____ Change Add __ Remove 4) ____ Change __ Add Remove 5) ____ Change ___ Add Remove 6) ____ Change

F	If amending or adding additional Articles, enter change(s) here:
Ŀ.	(Attach additional sheets, if necessary). (Be specific)
F.	If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
	provisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)

date this document was signed. Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sh action was not required.	narcholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated 07/08/2012	
Signature (FFP)	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Octovio Mirillo Patino	
(Typed or printed name of person signing)	
(VP) Vice Presidente (Title of person signing)	