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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: HOME REMODE	LING OF PALM COAST,	INC
DOCUMENT NUMBI	ER: P22000024032		······································
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
		CRISTIAN J NAVARRET	E
_	·	Name of Contact Persor	1
		PRESIDENT	
-		Firm/ Company	
	1.	7 PRINCESS DOLORES L	N
_		Address	· · · · · · · · · · · · · · · · · · ·
		PALM COAST, FL 3216	4
_		City/ State and Zip Code	c
	LT.	NFO@AG-BOOKKEEPIN	G.COM
		sed for future annual report	
For further information	concerning this matter, plea	se call:	
CRISTIAN J NAVAR	RETE	at (276-5112
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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The Co 2415 (Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

to

HOME REMODELING OF PALM COAST, INC	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P2200002	4032
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
CNC RENOVATION & CONSTRUCTION INC	The new
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.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	17 PRINCESS DOLORES LN
(Principal office address MUST BE A STREET ADDRESS)	PALM COAST, FL 32164
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	17 PRINCESS DOLORES LN
	PALM COAST, FL 32164
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
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 Do	<u>e</u>	
X Remove	Y	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l)Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				-
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Art	ncies, enter change(s) nere:
(Attach additional sheets, if necessary).	(Be specific)
	
	<u></u>
······································	
if an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(ij not applicable, maicale (VA)	
	· · · · · · · · · · · · · · · · · · ·
	

	JULY 10 2024	
The date of each amendment(s) addate this document was signed.	option:	, if other that
_	25 2024	
Effective date <u>if applicable</u> :		
	(no more than 90 da	after amendment file date)
Note: If the date inserted in this bl document's effective date on the De		statutory filing requirements, this date will not be listed
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	oted by the incorporators, or boar	of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su		ber of votes cast for the amendment(s)
☐ The amendment(s) was/were ann	oved by the shareholders through	voting groups. The following statement
must be separately provided for		
"The number of votes post	or the amendment(s) was/were si	Figure for annearal
	, -	ncient for approval
by		
7/10/202 Dated	(voting group)	
Dated	ou de	-
Signature		
	ector president or other officer -	f directors or officers have not been
		is of a receiver, trustee, or other court
appoint	ed fiduciary by that fiduciary)	
	CRISTIAN I NA	ARRETE
	(Typed or printed name	of person signing)
	PRESIDEN	
	(Title of person signin	



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Detail by Entity Name

Florida Profit Corporation HOME REMODELING OF PALM COAST, INC.

Filing Information

Document Number P22000024032

FEI/EIN Number

88-1242655

Date Filed

03/16/2022

State

FL

Status

ACTIVE

Principal Address

17 PRINCESS DOLORES LN PALM COAST, FL 32164

Mailing Address

17 PRINCESS DOLORES LN PALM COAST, FL 32164

Registered Agent Name & Address

NAVARRETE, CRISTIAN J 17 PRINCESS DOLORES LN PALM COAST, FL 32164

Officer/Director Detail

Name & Address

Title P

NAVARRETE, CRISTIAN J 17 PRINCESS DOLORES LN PALM COAST, FL 32164

Annual Reports

Report Year	Filed Date
2023	05/01/2023
2024	04/28/2024

Document Images

04/28/2024 ANNUAL REPORT	View image in PDF format
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Florida Department of State (No.s on of Colombinations)



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Name & Address

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04/28/2024 - ANNUAL REPORT	View image in PDF format
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Horrital Department of State (Division of Corporations)