

P22000027749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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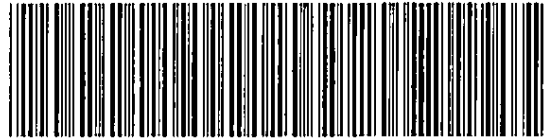
(Business Entity Name)

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: PR SEPTIC SERVICES, INC

DOCUMENT NUMBER: P22000027749

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE VARGAS  
Name of Contact Person  
PR SEPTIC SERVICIES , INC  
Firm/ Company  
6640 ARTHUR STREET  
Address  
HOLLYWOOD, FL 33024  
City/ State and Zip Code  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE VARGAS at (954-639-2562)  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |                                          |                                                                                   |                                                                                                     |                                                                                                                            |
|------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

## PR SEPTIC SERVICES INC

P22000027749

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

☐ 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:

☒ Change      PT      John Doe

☐ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

| Type of Action<br>(Check One)              | Title    | Name                            | Address                       |
|--------------------------------------------|----------|---------------------------------|-------------------------------|
| 1) <input type="checkbox"/> Change         | <u>P</u> | <u>JORGE VARGAS</u>             | <u>JOSE VARGAS</u>            |
| <input type="checkbox"/> Add               |          |                                 | <u>6640 ARTHUR STREET</u>     |
| <input checked="" type="checkbox"/> Remove |          |                                 | <u>HOLLYWQOOD, FL 33024</u>   |
| 2) <input type="checkbox"/> Change         | <u>P</u> | <u>JORGE YAROS GUTIERREZ JR</u> | <u>JORGE YAROS GUITIERREZ</u> |
| <input checked="" type="checkbox"/> Add    |          |                                 | <u>6640 ARTHUR STREET</u>     |
| <input type="checkbox"/> Remove            |          |                                 | <u>HOLLYWQOOD, FL 33024</u>   |
| 3) <input type="checkbox"/> Change         |          |                                 |                               |
| <input type="checkbox"/> Add               |          |                                 |                               |
| <input type="checkbox"/> Remove            |          |                                 |                               |
| 4) <input type="checkbox"/> Change         |          |                                 |                               |
| <input type="checkbox"/> Add               |          |                                 |                               |
| <input type="checkbox"/> Remove            |          |                                 |                               |
| 5) <input type="checkbox"/> Change         |          |                                 |                               |
| <input type="checkbox"/> Add               |          |                                 |                               |
| <input type="checkbox"/> Remove            |          |                                 |                               |
| 6) <input type="checkbox"/> Change         |          |                                 |                               |
| <input type="checkbox"/> Add               |          |                                 |                               |
| <input type="checkbox"/> Remove            |          |                                 |                               |

**E. If amending or adding additional Articles, enter change(s) here:**

(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)

[illegible]

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

01/10/2024

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 be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ 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)

01/10/2024  
Dated \_\_\_\_\_

Signature Jose Vargas  
(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)

JOSE VARGAS

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)