## Florida Department of State

**Division of Corporations** Electronic Filing Cover Sheet

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: GOMES INSURANCE & ACCOUNTING CORP

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN JVFLOORING SERVICES CORP

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· 12/23/2022

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahussee, FL 32314

## From: Paulo Gom

## **COVER LETTER**

NAME OF CORPORATION: JV FLOORING SERVICES CORP DOCUMENT NUMBER: P22000041017 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PAULO GOMES Name of Contact Person GOMES INSURANCE & ACCOUNTING CORP Firm/ Company 240 LOCK ROAD Address DEERFIELD BEACH, FL 33442 City/ State and Zip Code paulo@gomesins.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: PAULO GOMES at ( 954 ) 818-2991

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filling Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to



	Articles of Incorporation of	2022 JUH 22 PH 1:54
JVFLOORING SERVICES CORP	, UI	The state of the s
(Name of Co	prporation as currently filed with the Florida	Dent. of State)
P22000041017		/
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	6, Florida Statutes, this <i>Florida Profit Corporati</i>	on adopts the following amendment(s) to
A. If amending name, enter the new name	of the corporation:	
JV FLOORING SERVICES CORP		_
name must he distinguishable and contain the v "inc.," or Co.," or the designation "Corp, "chartered," "professional association," or the	word "corporation," "company," or "incorpora " "Inc," or "Co". A professional corporation he abbreviation "P.A."	The new ted" or the abhreviation "Corp.," on name must contain the word
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE)		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	e: ICE BOX	
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office address in Florida, enter the ristered office address:	name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	and the same of th	, Florida
	(Ciņ-)	(Zip Code)
New Registered Agent's Signature, if chang! hereby accept the appaintment as registered.	ing Registered Agent: agent. I am familiar with and accept the obliga	tions of the pusition.
••	Signature of New Registered Agent, if changi	ng

Check if applicable  $\square$  The amendment(s) is are being filed pursuant to s. 607.0120 (11) (e), F.S.

From: Paulo Gon

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 = Treusurer; 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, Treusurer, 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	PT John	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sali	v Smith	
Type of Action (Check One)	<u>.Tide</u>	Name	<u>Addres</u> s
1) Change	P	LEANDRO DE SOUZA	501 NW 42 CT 10x
Add X Remove			POMPANO BEACH, FL 33064
2) Change	<u></u>	JOSE M VILLALOBO ESCOBAR	501 NW 42 CT108
X Add			POMPANO BEACH, FL 33064
Remove 3) Change	<del></del>		
Add			
Remove 4) Change			
Add Remove			
5) Change Add	taganingga yay asamin		
Remove 6) Change			
Add			
Remove			

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f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate NA)	nange, reclassific adment if not co	ation, or cance ntained in the	llation of issue umendment it	ed shures, self:	
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The date of each amendment(s) addite this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirement partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without share	holder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the ar	nendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The follows each voting group entitled to vote separately on the amendme	ing statement ent(s):
"The number of votes east	or the amendment(s) was/were sufficient for approval	
ьу	(voting group)	
	(voting group)	
(By a dis	ector, president or other officer - if directors or officers have by an incorporator - if in the hands of a receiver, trustee, or	not been
appoints	d-fiduciary by that fiduciary)	odici coliti
I	EANDRO DE SOUZA	
- -	(Typed or printed name of person signing)	
1	PRESIDENT	
-	(Title of person signing)	