P22000047292

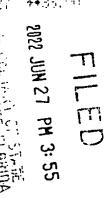
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SUNSHINI	E LUXURY REMODELING CO	ORP	
DOCUMENT NUMBER: P22000047292			
The enclosed Articles of Amendment and fe	ee are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
DANIA DE AVILA			
	Name of Contact Pers	on	
SUNSHINE LUXUR	Y REMODELING CORP		
	Firm/ Company		
4287 CORAL SPRIN	GS DR		
	Address		
CORAL SPRINGS FL 33065			
	City/ State and Zip Co	de	
GISELS@YOUROA	SISINC.COM		
E-mail address: ((to be used for future annual repo	rt notification)	
For further information concerning this matt	·	557-5641	
Name of Contact Person	Area C	557-5641 Code & Daytime Telephone Number	
Enclosed is a check for the following amoun	nt made payable to the Florida De	partment of State:	
S35 Filing Fee S43.75 Filing Certificate of S	•	☐\$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	Amer Divis The 2415	et Address Indiment Section Indiment Section Indicate of Corporations Indicate of Tallahassee Indicate of N. Monroe Street, Suite 810 Indicate of Tallahassee, FL 32303	

Articles of Amendment to Articles of Incorporation of

SUNSHINE LUXURY	REMODELING CORP
-----------------	-----------------

(Name of Corporation as currently	filed with the Florida Dept. of State)		
P22000047292			
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006 , Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the fo	llowing amend	ment(s) to
A. If amending name, enter the new name of the corporation:			
		The n	
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbi professional corporation name must	reviation "Corp contain the we	o.,'' ord
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 new registered agent and/or the new registered office address	ress in Florida, enter the name of the	2022 JUN 27 PH 3: 56	FILED
_			
(Florida su	reet address)		
New Registered Office Address:	(City) , Florida_	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar Signature of New I	t: with and accept the obligations of the pe Registered Agent, if changing	osition.	

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)

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	PT	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ERIC SOTO	4287 CORAL SPRINGS DRIVE
X Add			CORAL SPRINGS FL 33065
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			2022 TALL
Remove			<u>} </u>
5) Change			SSEE STATE
Add			
Remove			3: 56 ORIHA
6) Change			
Add			
Remove			

	<u></u>
	<u> </u>
<u>,</u>	
	<u> </u>
an amendment provides for an exchange, reclassification, or cancellation of issued sha	ires,
orovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	2022 7ă[[;
(ij not appricable, mateure 1911)	\[\alpha \]
	JUN 27
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	27 PH 3: 56 SSEE, FLORIDA
	27 PH 3: 56

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The date of each amendment(s) ac	loption:		·	•	if othe	r than the
date this document was signed.						
Effective date <u>if applicable</u> :	(no more than 9	0 days after amendment file	date)	_	<u> </u>	-
				***	a ka a Ka	مناعهم لندع
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applic partment of State's records.	cable statutory filing require	ements, this dat	e wiii no	t de lis	ted as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)					
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or	board of directors without sh	nareholder actio	n and sha	irehold	er
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The fficient for approval.	e number of votes cast for th	ne amendment(s)		
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders thr each voting group entitled to	ough voting groups. The fol vote separately on the amen	llowing stateme adment(s):	# TALL	2022	
	for the amendment(s) was/we			TALLAHASSEE	2022 JUN 27	<u> </u>
by	(voting group)	·		SSEE.	27 PH	TIME
Dated				FLONIDA	PM 3: 56	D
selecte	irector, president or other offi d, by an incorporator – if in the ted fiduciary by that fiduciary	e hands of a receiver, truste	have not been e, or other court	τ		
	DANIA DE AVILA					
	(Typed or printed	name of person signing)				_
	DAMA DE AL	-				_
	(Title of person si	gning)				