# Paa00015124

(Req	uestor's Name)	)
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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: TARP PRO SERV	TCES INCORPORATED	
		P22000075724	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return ail correspo	ondence concerning this ma	tter to the following:	
	J(	DRGE A SARMIENTO	
_		Name of Contact Person	1
		Firm/ Company	
		2625 SE 20TH CT	
<del></del>		Address	
_	НОУ	MESTEAD FL 33035  City/ State and Zip Code	0
<u></u>		lver1@hotmail.com sed for future annual report	notification)
		·	
For further information c	oncerning this matter, pleas	se call:	
JORGE A SARMIENT	О	at (	5398593
Name of	Contact Person	Area Co	) 5398593 de & Daytime Telephone Number
Enclosed is a check for the	he following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 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)
Ameno Divisio P.O. B	g Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation

TARP PRO SERVICES INCORPORATED

P22000075724

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rida	Dept.	of Sta	<u>ρ,</u>	5: 0

(Name of Corporation as currently filed with the Flo ~~~0/

er of Corporation (if known)
this Florida Profit Corporation adopts the following amendmen
<u>ı:</u>
The new
" "company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word A."
N/A
N/A
address in Florida, enter the name of the ress:
a street address)
. Florida
(City) (Zip Code)
gent: iar with and accept the obligations of the position.
w Registered Agent, if changing
i 1

Check if applicable

 $\square$  The amendment(s) is/are being tiled 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	ANTONIO FABIAN GONZALEZ	2625 SE 20th CT
Add			HOMESTEAD FL 33035
X Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			·
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

E. If amend (Attach a	ding or adding adding additional sheets, if	ditional Articles, ( necessary). (Be	enter change(s) specific)	<u>here</u> ;			
N/A							
	·			·			
		·					
						<u> </u>	
						<u> </u>	
						<del></del>	
F. If an am	endment provides	s for an exchange.	. reclassification	. or cancellation	of issued shares.		
provisio	ons for impleme <mark>nt</mark>	ing the amendme	nt if not contair	ied in the amend	ment itself:	•	
( <i>ij i</i> N/A	not applicable, indi	cate N/A)					
18724							
	<del> </del>						
				··			
	1						

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	11/13/2024	
	adoption:	, if other than th
date this document was signed.		
Commission data is annihable.	11/13/2024	
Effective date <u>if applicable</u> :	(no more than 90) days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, the partment of State's records.	nis date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ac action was not required.	lopted by the incorporators, or board of directors without shareholder	r action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendr sufficient for approval.	nent(s)
	oproved by the shareholders through voting groups. The following start each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by N/A		
by	(voting group)	
	Triming St. out 1	
11/13/20	124	
Dated		
Signature	director, president or other officer – if directors or officers have not be	
(By a c	firector, president or other officer – if directors or officers have not b	peen
	ed, by an incorporator – if in the hands of a receiver, trustee, or other	court
арроп	nted fiduciary by that fiduciary)	
	JORGE ANDRES SARMIENTO	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)

# Articles of Amendment Articles of Incorporation

TARP PRO SERVICES INCORPORATED

### (Name of Corporation as currently filed with the Florida Dept. of State)

P22000075724

nt(s) to

		? ., ``
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the f	ollowing amendme
A. If amending name, enter the new name of the corpora	ation:	
N/A	<del></del>	
name must be distinguishable and contain the word "corpora". "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviatio	"Co". A professional corporation name must	The new previation "Corp.," contain the word
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS	<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	
		·
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		<del></del>
	<del></del>	
D. If amending the registered agent and/or registered of	ffice address in Florida, enter the name of the	
new registered agent and/or the new registered office		
N/A  N/A  N/A		
	Florida street address)	
New Registered Office Address:	, Florida	
New Neglistered Office rada/ess.	(City)	(Zip Code)
N. D. C. L. C.		
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f		sition.
,,		
C'	of New Besterned Associated	<del></del> -
Signature C	of New Registered Agent, if changing	
C1 - 1 'c 1' - 1 ( )		

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.

X Change	<u>PT</u>	<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	V	ANTONIO FABIAN GONZALEZ	2625 SE 20th CT
Add			HOMESTEAD FL 33035
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			****
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
<del></del> -	
	· · · · · · · · · · · · · · · · · · ·
	<del>-</del>
	<del>-</del>
nrovisions for implementing the america	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nament if not contained in the amendment user.
N/A	
	<del></del>

•

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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 a 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 N/A
(voting group)
11/13/2024 Dated
Signature
(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)
JORGE ANDRES SARMIENTO
(Typed or printed name of person signing)
PRESIDENT

(Title of person signing)