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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: JMAR RESTORA	TION, INC.		_		
	1BER:		_	_		
	es of Amendment and fee are su	bmitted for filing.				
Please return all corr	respondence concerning this ma	ter to the following:				
	Hugo Garcia					
		Name of Contact Persor	- 			
	FLORIDA GENERAL COU	NSEL, P.A.				
		Firm/ Company				
3401 NW 82 AVE SUITE 360						
	Address					
DORAL, FL 33122						
	jmarrestoration@gmail.com					
	E-mail address: (to be us	ed for future annual report		-		
For further informati	on concerning this matter, pleas	e call:) 978-5844 de & Daytime Telephone No artment of State: □\$52.50 Filing Fee			
Marilin Avila		305	978-5844	50	29	
Name of Contact Person Area Code & Daytime Telephone Numb				umber-	22 (<u>्या भृत्य</u> ी
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:		2922 OCT 11	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	A OB STATE	MM 8: 56	

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

-7

Articles of Amendment to Articles of Incorporation of

JMAR RESTORATION INC.

AN CO		
	filed with the Florida Dept. of State)	
P22000075847		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this F_0 its Articles of Incorporation:	orida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "co		The new
"Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany, or incorporated or the abbi professional corporation name must	eviation "Corp., contain the word
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)		
		
		<u> </u>
D. If amonding the aminous description of the second secon		72 TA
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
		AMERICAN TO STREET
Name of New Registered Agent		<u> इस्त</u> म्हारूष
(Florida stree	(address)	<u>ال</u>
New Registered Office Address:	. Florida	트립 명
	ity)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the pos	ition.
Signature of New Dee	istered Agent, if changing	
Signature of New Reg	метей лует, у спануту	

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 <math>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	PT	John Doe	
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	P	MARILIN I A VIA' A	MIAMI, FL. 33177 US
Add			MIAMI, FL. 33177 US
X Remove			
2) Change	VP	JOVER R PA%oREZ	14364 SW 161 ST
Add			MIAMI, FL. 33177 US
X Remove 3) Change	Р	MARILIN I AVILA	14364 SW 161 ST
X Add			MIAMI, FL. 33177 US
Remove			
4) Change	VP	JOVER R PEREZ	14364 SW 161 ST
X Add			MIAMI, FL. 33177 US
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

	onal sheets	s, if necesse	l Articles, e ary). (Be :	specific)					
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an amendn	nent provi	ides for an	exchange,	reclassific:	ation, or c	ncellation	of issued s	shares,	
provisions fo	<u>or implem</u>	enting the	amendmer	it if not co	<u>ntained in</u>	the amend	ment itsel	<u>f:</u>	
(ij noi ap	эрисате, і	indicate N/.	A)						
									
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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
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. Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac action was not required.	dopted by the incorporators, or board of directors without sharehold	ler 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 amen sufficient for approval.	dment(s)
	proved by the shareholders through voting groups. The following reach 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		
<u> </u>	(voting group)	
10/6/2022 Dated Signature	Silver	
(By a select	director, president or other officer – if directors or officers have no ed, by an incorporator – if in the hands of a receiver, trustee, or oth ted fiductory by that fiductory)	
	MARILIN I AVILA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	