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(((H23000070822 3)))



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īo:	
	Division of Corporations
	Fax Number : (850)617-6380
from:	
	Account Name : INDEPENDENT TAX SERVICES PLUS CORP.
	Account Number : 120020000072
	Phone : (305)887-0001
	Fax Number : (305)884-6444
**Enter	the email address for this business entity to be used for future or
anr	ual report mailings. Enter only one email address please.**
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AMIND/RESTATE/CORRECT OR O/D RESIGN CC RENOVATION SERVICES CORP

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J. HORNE

FEB 2 4 2023

COVER LETTER

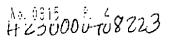
TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CC RENOVATIO	N SERVICES CORP	
	BER: P23000002052		
	s of Amendment and fee are su	bmitted for filing,	
Please return all corr	espondence concerning this ma	tter to the following:	
	CLARO DIAZ CONTRERA	S	
		Name of Contact Person	n
	CC RENOVATION SERVICE	CES CORP	
		Firm/ Company	
	1840 NW 50 TH ST		
		Address	
	MIAMI FL 33142		
		City/ State and Zip Cod	ε
	independenttaxservices@hoti	mail.com	
	E-mail address: (to be us	sed for future annual report	nonfication)
For further information	on concerning this matter, pleas TRERAS		914-7570
Name	of Contact Person	Area Co	914-7570 de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made		
S35 Filing Fee	\$43.75 Filing Fcc & 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

CC RENOVATION SERVICES CORP.

(Nama of Corporate	on as currently filed with the Flo	ride Dent of State)		
	on as currency thea with the Fig	rida Dept. of State)	 -	~
P23000002052	N 1 80 1 (21		- <u>25 (S</u>	===
(Docum	nent Number of Corporation (if kno	own)		
(Docum Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corp	oration adopts the fol	llowing an	nendmen W
A. If amending name, enter the new name of the co	orporation:		i i i i i i i i i i i i i i i i i i i	PH 12:
name must be distinguishable and contain the word "co"Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre	" or "Co". A professional corp	"porated" or the abbro oration name must o	eviation " contain th	Corpo," e word
B. Enter new principal office address, if applicable	:			
(Principal office address MUST BE A STREET ADD				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>			
D. If amending the registered agent and/or register new registered agent and/or the new registered of the new		er the name of the		
Name of New Registered Agent				
	(Florida street adáress)			
	12 to rida sir cer addressy			
New Registered Office Address:	(City)	, Florida	(Zip Code	
	(Uny)		(Alp Cour	,
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		obligations of the pos	ítion.	
Sionn	iture of New Registered Agent. if c	hanging		
J.g.n.	o op 1 to the execution of tagorite in o	66		
Check if applicable The amendment(s) is/are being filed pursuant to s. 6	507.0120 (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 = ChiefExecutive 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: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Saliy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	CLARO DIAZ CONTRERA	1840 NW 50 TH STMIAMI,
Add			FL 33142
X Remove			
2) Change			<u> </u>
Add			
Remove 3) Change			
Add			
Remove			.
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach	additional sheets, if necessary). (Be				
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			· · · · · · · · · · · · · · · · · · ·		
				<del>-</del>	
				-	
	A.F.				
~					
provis	mendment provides for an exchange sions for implementing the amendm f not applicable, indicate N/A)	e, reclassification, ent if not containe	or cancellation of iss d in the amendment	ued shares. itself:	
			· · · · ·		
•					
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	02/23/2023	
The date of each amendment(s)	adoption:	, if other than th
date this document was signed.		
	/23/2023	
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirement Department of State's records.	is, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amusufficient for approval.	endmen:(s)
	pproved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendmen	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	,	
	(voting group)	
02/23/202	3	
Dated	<del></del>	
Signature	NDWZ.	
(By a selec	director, president or other officer – if directors or officers have ted, by an incorporator – if in the hands of a receiver, trustee, or onted fiduciary by that fiduciary)	
	CLARO DIAZ CONTRERAS	
	(Typed or printed name of person signing)	
	PRESIDENT/DIRECTOR	
	(Title of person signing)	