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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GUIFARLOP CO.	NSTRUCTION & REMOD	DELING CORP			
DOCUMENT NUMB	CUMENT NUMBER: P23000002762					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
	,	ANGELA I GUIFARRO LO	OPEZ			
	Name of Contact Person					
	GUIFARLOP CONSTRUCTION & REMODELING CORP					
•	Firm/ Company					
-	Address					
	1579 61ST AVE, WEST PALM BEACH, FL 33415					
-		City/ State and Zip Code	e			
		GUIFARFLOP@GMAIL.C	COM			
-		sed for future annual report				
For further information	concerning this matter, pleas	se call:				
ANGELA	I GUIFARRO LOPEZ	at (951-1190			
Name o	Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
■ \$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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation of

GUIFARLOP CONSTRUCTION & REMODELING CORP

(Name of Corporation as e		rida Dept. of State	l		
	P23000002762				
(Document Nu	umber of Corporation (if kno	own)			
Pursuant to the provisions of section 607,1006, Florida Statut its Articles of Incorporation:	tes, this <i>Florida Profit Corp</i> e	oration adopts the fo	ollowing a	mendn	ieni(s) t
A. If amending name, enter the new name of the corpora	tion:				
	<u> </u>			he ne	
name must be distinguishable and contain the word "corporat "Inc.," or Co.," or the designation "Corp," "Inc," or " "chartered," "professional association," or the abbreviation	Co". A professional corp				
B. Enter new principal office address, if applicable:			<u></u> .	2,7	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>(</u>)		: •	3	
					
					 -
C. Enter new mailing address, if applicable:			• • •	: :	.,
(Mailing address MAY BE A POST OFFICE BOX)	 			्र	
				يَي	
D. If amending the registered agent and/or registered offi new registered agent and/or the new registered office a		er the name of the			
Name of New Registered Agent					
(F)	lorida street address)				
New Registered Office Address:	2.10	, lflorida		1	
	(City)		(Zip Coe	de)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		obligations of the po	sition.		
	·				
Signature 03	of New Registered Agent, if c	hanging			
Check if applicable					
☐ The amendment(s) is/are being filed pursuant to s, 607.01.	20 (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 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	\underline{Y}	Mike Jones	2	
X Add	<u>sv</u>	Sally Smith	1	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	ame	<u>Addres</u> s
1) Change	VP		RAMON PADILLA FLORES	1579 61ST AVE SOUTH
				WEST PALM BEACH, FL 33415
X Remove				
2) Change			·	
Add				
Remove 3.) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change		<u> </u>		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
PLEASE REMOVE RAMON PADILLAS FLORES
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

•

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
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 document's effective date on the Department of State's records.	will not be listed as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shareholder
☐ 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):	t
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
Dated	
Signature Quetablical	
(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)	
ANGELA I GUIFARRO LOPEZ	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)