## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H23000413520 3)))



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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : MEDICAL BILLING CONSULTANTS, INC.

Account Number : I20200000206 Phone : (305)463-6690 Fax Number : (305)463-6693

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Enail	Address:	 :! '≥' co

## COR AMND/RESTATE/CORRECT OR O/D RESIGN J&B SMART CHOICE CONSTRUCTION, CORP

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To: '

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December 4, 2023

FLORIDA DEPARTMENT OF STATE

JEB SMART CHOICE CONSTRUCTION, CORP. 1308 WORTHINGTON ST APT 1A WEST PALM BEACH, FL 33401

SUBJECT: J&B SMART CHOICE CONSTRUCTION, CORP

REF: P23000015690

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Florida law requires the principal office address to be a street address.

The designation of the registered agent must be at a Florida street address.

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

FAX Aud. #: H23000413520 Tammi Cline

Letter Number: 123A00027630 Regulatory Specialist II Supervisor

Articles of Amendment to Articles of Incorporation

of	•
TRR Smart Choice	Construction Corp
J&B Smart Choice ( Name of Corporation as currently	filed with the Florida Dept. of State)
P2300001.	5690
(Document Number of	
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	Iorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
<del></del>	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, If applicable: (Principal office address MUST BE A STREET ADDRESS)	professional corporation name must contain the word  716 Alexander Palm CT, Apt 318  Langwood, Florida, 32779
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO. Box 915802 Longwood, FL 32791
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent Yovany M. B	er Palm CT. Apt 3180 8
New Registered Office Address:	(City) , Florida 32 779 (City)
New Registered Agent's Signature, if changing Registered Agent.  I hereby accept the appointment as registered agent. I am familiar s	with and accept the obligations of the position.
Signature of New R	egyptrod Agent, if changing
Check if applicable  The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	ř

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	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>P</u>	Santos J. Lopez Aguilo	N. 1308 Worthington ST
Add			West Palm Beach, FL 33401
Remove		1 10 11	
2) Change	VP	YOVany M. Baguet Vazq	vez 716 Alexandor Palm CT, Apt 318 Longwood, FL 32779
Aċd			Longwood, FL 32779
Remove 3) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			ann garann an an dar lag prote ordername e adalarin i rene demonstration, dag at the day of a the
5) Change			and the second s
Add			**************************************
Remove			
6) Change	<del></del>		
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(y nor applicable, maioric 1477)	

The date of each amendment(s) adoption:	, if other than the
date 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 dadocument's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	ion and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
Dated 12/04/23	
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 couppointed fiduciary by that fiduciary)	rt
(Typed or printed name of person signing)	2Z
Muh	
(Title of person signing)	