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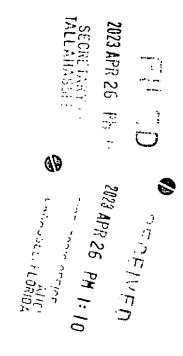
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PICK-UP	☐ WAIT	MAIL
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: Instructions to File	ing Officer;	
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Office Use Only



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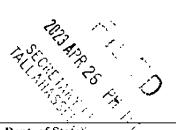
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: PEREZ PAVERS	SERVICES INC	
DOCUMENT NUMB	ER: P23000028017		
	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
	LUCIMAR V. MUSCH		
-		Name of Contact Person	n
	LM ACOUNTING & PAYR	OLL SERVICES LLC	
•		Firm/ Company	
	8382 BAYMEADOWS RD,	· •	
•		Address	
	JACKSONVILLE, FL 32256	ó	
•		City/ State and Zip Cod	c
	LMPAYROLL13@GMAIL.	СОМ	
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea		699-6634
Name o	f Contact Person	at (904Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made		
S35 Filing Fee	☐\$43.75 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)
Ame Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co	Address Iment Section In of Corporations Entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



PEREZ PAVERS SERVICES INC

(Name of Corporat	tion as currently filed with the Florida Dept. of State)
P23000028017	
(Docu	iment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floricits Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the o	corporation:
	The new
	corporation," "company," or "incorporated" or the abbreviation "Corp.," c," or "Co". A professional corporation name must contain the word reviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BE	<u>OX</u>)
	ered office address in Florida, enter the name of the
 If amending the registered agent and/or registered new registered agent and/or the new registered 	
new registered agent and/or the new registered	
new registered agent and/or the new registered	
new registered agent and/or the new registered	d office address:

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.

Example: X Change PT John Doe V X Remove Mike Jones X Add <u>SV</u> Sally Smith Type of Action <u>Title</u> <u>Name</u> Address (Check One) PEREZ AGUILAR 10275 OLD ST. AUGUSTINE RD 1) ____ Change **SUITE 4** ____ Add JACKSONVILLE, FL 32257 Remove PEREZ AGUILAR, MARIO 10275 OLD ST. AUGUSTINE RD 2) ____ Change APT 1202 Add JACKSONVILLE, FL 32257 Remove 3) ____ Change ____ Add Remove 4) ____ Change ____ Add __ Remove 5) ____ Change Add ____ Remove 6) ____ Change ___ Add __ Remove

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 NA)	•	<mark>ling or adding additi</mark> dditional sheets, if nec	cessary). (Be speci	fic)		
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	provisio	<u>ons for implementing</u>	e N/A)			

The date of each amendment(s) adoption:	if other than
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 date document's effective date on the Department of State's records.	will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
■ 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):	,
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
04/25/2023 Dated	
Signature Autografia	
(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)	
MARIO PEREZ AGUILAR	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)

the

the