## P2400000 4897

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Requestor's Name)
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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPO	RATION: APG REMODEL	ING SERVICES CORP	
	BER: P24000004897		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	ALFREDO PEREZ		
	-	Name of Contact Person	
	Firm/ Company		
	2011 18TH NE AVE		
		Address	
	NAPLES,FL 34120		
		City/ State and Zip Code	<u> </u>
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
WALDO GONZALI	EZ .	786 at (	623 9638 de & Daytime Telephone Number
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or 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		Street	Address

Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

## Articles of Amendment to Articles of Incorporation of

APG REMODELING SERVICES CORP

(Name of Corporation	on as currently	filed with the Florida	Dept. of State)	
P24000004897	. <u>-</u>			
(Docum	nent Number of	Corporation (if known)		<del></del>
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this $F$	lorida Profit Corporati	on adopts the follow	ving amendment(s)
A. If amending name, enter the new name of the co	orporation:			
				The new
name must be distinguishable and contain the word "ca "Inc.," or Co.," or the designation "Corp," "Inc.) "chartered," "professional association," or the abbre	" or "Co". A			
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD				<del></del>
(Frincipal office address <u>StOST BE A STREET ADD</u>	7KE33 )			<del>.</del>
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO.	<u>(X</u> )			
				<u>.</u>
		*****		
D. If amending the registered agent and/or register	red office addre	ss in Florida, enter the	e name of the	
new registered agent and/or the new registered				
Name of New Registered Agent				
				• .
	(Florida stree	t address)		
New Registered Office Address:			Florida	
	((	lity)	C.	ip Code)
New Registered Agent's Signature, if changing Reg				
I hereby accept the appointment as registered agent.	l am familiar wi	th and accept the obliga	ations of the positio	n.
Signo	nure of New Res	distered Agent, if chang	ing	
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	<u>PT</u>	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	VP	WALDO GONAZALEZ	878 12TH ST NE
X Add			NAPLES, FL 34120
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
		<del></del>
-		
·· <del>-</del> -		
		<del></del>
	and the second s	
n amendment provides for an excr ovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
	<del></del>	

•

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:	•	
a applicable,	(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this document's effective date on the D	plock does not meet the applicable statutory filing epartment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors wit	hout shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cas ufficient for approval.	t for the amendment(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups.  each voting group entitled to vote separately on the	The following statement e amendment(s):
"The number of votes cas	for the amendment(s) was/were sufficient for appro	oval
by		"
	(voting group)	
Dated05/07/	2024	
Signature <u>Y</u>	MA	
selecte	irector, president or other officer – if directors or of id, by an incorporator – if in the hands of a receiver, ited fiduciary by that fiduciary)	ficers have not been trustee, or other court
	ALFREDO PEREZ (Typed or printed name of person significant person sign	ng)
	P RESIDENT (Title of person signing)	

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