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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION:		
DOCUMENT NUMI	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Cesar A Campos		
		Name of Contact Person	<u> </u>
	Col Builder Inc		
		Firm/ Company	
	10773 NW 58 St# 541		
		Address	· · · · · · · · · · · · · · · · · · ·
	Doral Fl 33178		
		City/ State and Zip Code	:
	info@dssbuilder.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:at (8905754
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made		
■ \$35 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 Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

	n as currently filed with the Fl	orida Dept. of State)
	40000 18433	
(Docum	ent Number of Corporation (if kr	nown)
ursuant to the provisions of section 607.1006, Florida s Articles of Incorporation:	Statutes, this Florida Profit Corp	poration adopts the following amendment(s
If amending name, enter the new name of the co	rporation:	
		Thenew
me must be distinguishable and contain the word "collnc.," or Co.," or the designation "Corp," "Inc," chartered," "professional association," or the abbrev	or "Co". A professional cor	
Enter new principal office address, if applicable; rincipal office address MUST BE A STREET ADD.		
		· · · · · · · · · · · · · · · · · ·
		-
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u></u>	
		<u> </u>
		□ ; = □ .:
If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, en ffice address:	ter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
	(City)	, Florida (Zip Code)
ew Registered Agent's Signature, if changing Regi	stered Agent:	
tereby accept the appointment as registered agent. I	am familiar with and accept the	obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

 \Box 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)

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>	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	OSCAR E BOTERO HENAO	10773 NW 58 ST APT 541
Add			DORAL FL, 33178.
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional	dding additional Ar sheets, if necessary).	(Be specific)	_			
						
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-						
						
- -					.	
						
-						
an amendment	provides for an exc	hange, reclassific	gation, or cancel	llation of issued	I shares,	
<u>provisions for in</u>	nplementing the am	<u>endment if not co</u>	ontained in the a	amendment itse	<u>elf:</u>	
(ң носаррис	rable, indicate N/A)					
						
<u> </u>						
-						
						
						

	Teach amendment(s) adoption: 10/7/2024 if other than the
date this doc	cument was signed.
Effective da	ate <u>if applicable</u> :
	(no more than 90 days after amendment file date)
	e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
Adoption o	f Amendment(s) (CHECK ONE)
The ameraction wa	ndment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder as not required.
	ndment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) hareholders was/were sufficient for approval.
	ndment(s) was/were approved by the shareholders through voting groups. The following statement separately provided for each voting group entitled to vote separately on the amendment(s):
'1'}	he number of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
	Dated
	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 court appointed fiduciary by that fiduciary)
	CETAR A. CAMPOS
	(Typed or printed name of person signing)
	Passioni
	(Title of person signing)