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COVER LETTER

TO: Amendment Section Division of Corporations

A Company of the Company

NAME OF CORPORA	ATION: ALLIANCE ENTE	RPRISES PROPERTY SEI	RVICES , INC		
DOCUMENT NUMBI	D24000022174	<u> </u>			
The enclosed <i>Articles o</i>	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
		SHERLEY SAJOUS			
_		Name of Contact Person	-		
_		Firm/ Company		<u>_</u>	
		573 NW 101ST STREET			
_		Address	·		
		MIAMI, FLORIDA, 3315	50		
_		City/ State and Zip Code			
		sajlegalserv@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	- s	
For further information	concerning this matter, pleas			SECRETARY OF STATE	Overage Sections
SHERL	EY SAJOUS	at (786	_) 262-7795 _) & Daytime Telephone N	2 X 2 Z	TI
Name of	*Contact Person	Area Cod	le & Daytime Telephone N	lumber =	7
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:	5 PAR -5)
S35 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)	·	
	ng Address	Street /	Address ment Section		

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 Articles of Incorporation of

ALLIANCE ENTERPRISES PROPERTY SERVICES			
·	y filed with the Florida Dept. of State)		
P24000022174			
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)		
A. If amending name, enter the new name of the corporation:			
ALLIANCE RENOVATION SERVICES , INC	The new		
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	professional corporation name must contain the word		
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	573 NW 101st Street		
(Mulling data ess MATTLE AT 1861 OF TICE BOT)	Miami, Florida 33150		
	<u> </u>		
D. If amending the registered agent and/or registered office addi	ress in Florida, enter the name of the		
new registered agent and/or the new registered office address			
Name of New Registered Agent			
	SSO T		
(Florida str	eet address)		
New Registered Office Address:	Florida TH G		
	(City) (Zlp Code)		
New Registered Agent's Signature, if changing Registered Agent			
I hereby accept the appointment as registered agent. I am familiar v	the control of the control of the position.		
Signature of New R.	egistered Agent, if changing		
,			
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (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)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change				
Add				
Remove				_
2) Change				
Add				
Remove 3) Change		90-L-		
Add				
Remove				_
4) Change				_
Add			<u></u>	
Remove			202 SEC TA	_
5) Change			RET LL/	7
Add			HAY 12 5	**
Remove			F13 -15 194	
6) Change				,e
Add				_
Remove				

(Attach additional sheets, if necessary).	(Be specific)	
N/A		
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		72 _ N
		SSP # 7
	ange reclassification or cancellation of issued shares	55
F. If an amendment provides for an excha	ange, rectassification, or cancenation of issued shares,	1,107
provisions for implementing the amen	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	MOFSTATE
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	15 TE
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	15 TATE
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	15 To
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	15 To
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	TATE OF
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	15 TATE 15
F. If an amendment provides for an exchange provisions for implementing the amen (if not applicable, indicate N/A) N/A	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	TATE OF
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	TATE OF
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	5
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	TATE 5
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	TATE 5

10/01/2024	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
10/01/2024	
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 dat document's effective date on the Department of State's records.	e will not be listed as th
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.	n 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 stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
10/01/2024	
Dated	
Signature ANDON C/ERVEAUX	
(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)	
CLERVEAUX ANDOU	
(Typed or printed name of person signing)	 -
CEO, PRESIDENT	
(Title of person signing)	_