P24000023013

(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: ALVAREZ PAIN	TING SPECIALIST			
DOCUMENT NUM	MBER: P24000023013				
	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	respondence concerning this ma	itter to the following:			
	SARA FLOREZ				
		Name of Contact Persor			
	FLOREZ ACCOUNTING & TAX SOLUTIONS INC				
	Firm/ Company			-	
	8051 N TAMIAMI TRAIL SUITE A9				
		Address		_	
	SARASOTA FL 34243				
	City/ State and Zip Code				
	E-mail address: (to be used for future annual report notification)				
For further informat	ion concerning this matter, plea	·			
SARA FLOREZ		at (de & Daytime Telephone Numb	<u>s20</u>	
Name of Contact Person		Area Co	de & Daytime Telephone Numb	2024 MAY SLERET	-no bad
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	AY -6 ET::3:	
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	5 PM 3: 40	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

to

ALVAREZ PAINTING SPECIALIST INC.

ALVARDET MITTING SELECTED TITLE		
(Name of Corpo	ration as currently filed with the Flor	ida Dept. of State)
24000023013		
(Do	ocument Number of Corporation (if know	wn)
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida Profit Corpo</i>	ration adopts the following amendment(s)
A. If amending name, enter the new name of th	e corporation:	
ALVAREZ TILE SPECIALIST, INC		The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp." "I "chartered," "professional association," or the al	Inc," or "Co". A professional corpo	porated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or reginew registered agent and/or the new registered.	istered office address in Florida, enter	r the name of the
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·	
	(Florida street address)	
New Registered Office Address:	(City)	Florida (TV) College
	(cii)	
New Registered Agent's Signature, if changing	Registered Agent:	
I hereby accept the appointment as registered ager	nt. I am familiar with and accept the or	bligations of the position.
	Signature of New Registered Agent, if ch	anging
Check if applicable		

 \square 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 Doc	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			·
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<u> </u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	7, - 12
	
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an amendment provides for an exch	hange, reclassification, or cancellation of issued shares.
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

•	03/28/2024	
The date of each amendment(s) as	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendmen fficient for approval.	nt(s)
	roved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
04/29/2024		
Dated		
Signature <u>Ce</u>	sar Alrarez Chavez	
(By a di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other could fiduciary by that fiduciary)	
	CESAR A ALVAREZ CHAVEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)