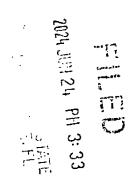
P24000028666

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AB BROS SERVI	CES, "CORP"	
	BER: P24000028666		
	s of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	YUENDRIS BLANCO		
		Name of Contact Person	1
		ala.	
		Firm/ Company	
	10820 SW 200 DRIVE #351	. ,	
		Address	
	MIAMI, FL 33157		
		City/ State and Zip Code	e
	yoendrisblancore@gmail.cor	n	
	· · · · · · · · · · · · · · · · · · ·	sed for future annual report	notification)
For further information	on concerning this matter, plea		7714671 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	iling Address		Address
	endment Section	Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

AB BROS SERVICES "CORP"

FILED

AD BROS SERVICES, CORI			**** E -3
(Name of Corporation as currently f	iled with the Florida Dept. of 👫	Me)	DH -
24000028666	,	00.1 24	P# 3: 33
(Document Number of C	orporation (if known)	1.1	- FIGTE
ursuant to the provisions of section 607,1006, Florida Statutes, this Fla s Articles of Incorporation:	orida Profit Corporation adopts the	e following (mendment(s
. If amending name, enter the new name of the corporation:			
·		7	he new
ame must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	npany," or "incorporated" or the a professional corporation name m	bbreviation ist contain	"Corp.," the word
Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDRESS</u>)			
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
-			
. If amending the registered agent and/or registered office addres	s in Florida, enter the name of th	<u>ıe</u>	
new registered agent and/or the new registered office address:			
Name of New Registered Agent			
(Florida street	address)		
New Registered Office Address:(Ci	, Florid	a(Zip Coo	<u></u>
	٠٠٠	(224)	/
ew Registered Agent's Signature, if changing Registered Agent:			
hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the	position.	
Signature of New Regi	stered Agent, if changing		
0. 1:6. 1. 1.			
heck 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)

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>	<u>John Doe</u>	
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	GONZALEZ, MIGUEL A	3571 SW 117TH AVENUE.
Add			#207 MIAMI, FL 33175
X Remove			
2) X Change	VP	RODGRIGUEZ, ANNIA	10820 SW 200 DRIVE, #351
Add			MIAMI, FL 33157
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
	_	
,	· · · · · · · · · · · · · · · · · · ·	
		
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
 -	<u> </u>	
		-
	-	
		-

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The date of each amendment(s) addate this document was signed.	doption:	, if other than th
Effective date if applicable:		
	(no more than 40 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 requirement partment of State's records.	ts, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareho	older action 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 amofficient for approval.	endment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
06/17/2024 Dated		
Signature	49. af	
selected	rector, president of other officer – if directors or officers have a l, by an incorporator – if in the hands of a receiver, trustee, or ced fiduciary by that fiduciary)	
	YOENDRIS BLANCO	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)