## 0240000043211

(Re	equestor's Name)	
(Äd	dress)	
(Ád	dress)	
(Cit	iy/State/Zip/Phon	e #)
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(Do	cument Number)	
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S. PRATHER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	CCION AND REMODELING BY JON INC
DOCUMENT NUMBER: P24000043211	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
BARBARA Y. DELGA	ADO LUIS
	Name of Contact Person
	Firm/ Company
5830 MEMORIAL HV	YY APT 1113
	Address
TAMPA FL 33615	
	City/ State and Zip Code
QBANISIMAYO@GN	MAIL.COM
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter	r, please call:
BARBARA Y. DELGADO LUIS	at ( 813 ) 2607268
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	made payable to the Florida Department of State:
S35 Filing Fee	<u> </u>
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address  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

pration as currently filed with the Florida Dept. of State)

				10
(Name of Corp	oration as currently filed with the	Florida Dept. of State)		T:
CONSTRUCCION AND REMODELING BY J	ON INC		<u></u>	SU Ti
(0	Document Number of Corporation (i	f known)	=:,	<u>မျာ</u> န
Pursuant to the provisions of section 607.1006, Fits Articles of Incorporation:	lorida Statutes, this <i>Florida Profit</i> (	Corporation adopts the follow	wing amen	
A. If amending name, enter the new name of	the corporation:			
CONSTRUCTION AND REMODELING BY J	ON INC		271 .	
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	"Inc," or "Co". A professional o	incorporated" or the abbrevi corporation name must con	The ation "Cor tain the s	n "
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u> )			
D. If amending the registered agent and/or re new registered agent and/or the new regist	gistered office address in Florida, ered office address:	enter the name of the		
Name of New Registered Agent				
	(Florida street address)	<u> </u>		
New Registered Office Address:		, Florida		
	(City)	(Z	ip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ago	z Registered Agent: ent. I am familiar with and accept	the obligations of the positio	n.	
	Signature of New Registered Agent,	if changing		

## 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 Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			_ /
Add			/
Remove 3) Change	<del></del> .		
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change	_/	<u> </u>	
Add			
Remove	/		

-en additional and east, if necession	al Articles, enter change(s) here: ary). (Be specific)	
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oppondment musical articles		
visions for implementing the	exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A	A)	

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl locument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for the amendme ficient for approval.	nt(s)
must be separately provided for e	oved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):  for the amendment(s) was/were sufficient for approval	
bv	<u>,</u>	
Dated	(voting group)	2024 JUL 10 PA 5: 7.ÈÉ a ssentifió
Signature	Ysanches	<u></u>
selected	ector president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other conditional data by that fiduciary)	en ourt
	YORQUI SANCHEZ CRUZ	
-	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)