P96000034989

(Re	questor's Name)	<u> </u>
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

524-709-523.



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2018 DEC 21 PH 1:38

C. GOLDEN
DEC 2 8 2018

COVER LETTER

Division of Corporations NAME OF CORPORATION: Anyhony J. Aiello Inc DOCUMENT NUMBER: P96000026289 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Anthony J. Aiello
Name of Contact Person Anthony J. Aiello Inc &ba Aiello Real Estate
Firm/ Company 1504 S. Riverside Dr.
Address Edgewater, Fl. 32132
City/ State and Zip Code tony Aiello 1 @ gmail. com

But address (to be used for future annual report notification) For further information concerning this matter, please call: Anthon, J. Aiello at (386) 689-0941

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: □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

ox 6327 Clifton B
assec. F1, 32314 2661 Exe

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301



December 12, 2018

ANTHONY J. AIELLO 1504 S. RIVERSIDE DRIVE EDGEWATER, FL 32132

SUBJECT: ANTHONY J. AIELLO, INC.

Ref. Number: P96000026289

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The entity's date of incorporation/organization must be listed in the document.

What changes are you making.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 918A00025484

RECEIVED ON 12: 0



November 29, 2018

ANTHONY J. AIELLO 1504 S. RIVERSIDE DRIVE EDGEWATER, FL 32132

SUBJECT: ANTHONY J. AIELLO, INC.

Ref. Number: P96000026289

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Please complete number 6.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 018A00024402

RECEIVED

Articles of Amendment to Articles of Incorporation of

FILED

2018 DEC 21 PM 1:38

ANTHONY J AIFLLO INC.

Alti	THORT J. AIELEO, INC.
(Name of Corporation :	as currently filed with the Florida Dept. of State) TARASSEF. E
Р	P96000026289
(Document	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida States and Incorporation:	statutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corpo	oration:
	Thenew
name must be distinguishable and contain the word " "Corp.," "Inc.," or Co.," or the designation "Corp," ' word "chartered," "professional association," or the abb	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)
	·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	·
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe Thereby accept the appointment as registered agent. I are	tered Agent: yam familiar with and accept the obligations of the position.
Signatu	ure of New Registered Agent, if changing

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.

E vample : <u>X</u> Change	PT John I	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	Secretary	Brenda Mehring	1504 S. Riverside Dr. Edgewater, Fl. 32132
X Add			Eagewater, Fri Je
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change((Be specific)			
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f an amendment provides for an exch	sanga rochseificati	on ar cancellation	of icenal charge	
provisions for implementing the ame	ndment if not conta	nined in the amend	lment itself:	
(if not applicable, indicate N/A)				
	· · · · · ·			
		<u> </u>		
		<u>,</u>		
	 -			

The date of each amendment(s) adoption: date this document was signed.	Dec. 1, 2018	, if other than the
Effective date <u>if applicable</u> : <u>Signe</u>	(no more than 90 days after amendment file date)	
V	not meet the applicable statutory filing requirements	
document's effective date on the Department of		,
Adoption of Amendment(s) (CI	IECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amer approval.	ndment(s)
	e shareholders through voting groups. The following group entitled to vote separately on the amendment	
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval	
by	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and sh	areholder
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	ulder
Dated 12/18/20	18	
Signature anthony	g. Lielle sides to or other officer – if directors or officers have n	
(By a director, pres	sident or other officer - if directors or officers have n	ot been
selected, by an inco appointed fiduciary	orporator – if in the hands of a receiver, trustee, or ot	her court
Anth	iony .T. Aiello	
	(Typed or printed name of person signing)	
Br	(Typed or printed name of person signing) Oler President Title of person signing)	
	Title of person signing)	