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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: VORTEX REMOI	DELING, INC		
DOCUMENT NUM	P20000060.110			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	NERIO J LUCES RAMIREZ	<u>'</u>		
		Name of Contact Persor		
	VORTEX REMODELING, INC			
		Firm/ Company		
	3706 SOUTHPOINTE DR			
		Address		
	ORLANDO, FL 32822			
		City/ State and Zip Code	?	
	NERIOLUCES@GMAIL.COM			
	_	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	407	701-7589	
Name of Contact Person		Area Coo	de & Daytime Telephone Number	
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	urtment of State:	
S35 Filing Fee	■\$43.75 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)	
Mailing Address			Address	
	endment Section	Amendment Section Division of Corporations		
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with the Florida Dept. of State)	
VORTEX REMODELING, INC		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fl its Articles of Incorporation:	orida Profit Corporation adopts the following	ing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbrevial professional corporation name must conto	tion "Corp.,"
B. <u>Enter new principal office address, if applicable:</u> (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)		F27
-	-	
		1
		<u></u>
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	P: -
Name of New Registered Agent		
Name of New Negistered agent		0.
(Florida stree	u address)	
New Registered Office Address:	, Florida	
((Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position	
Signature of New Reg	gistered 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)

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 Doe	
\underline{X} Remove	V	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	P	HAROLD SEDOYA	6915 CASTILLO CIRCLE
Add			ORLANDO, FL 32822
X Remove			
2) Change			-
Add			
Remove 3) Change			
Add			
Remove			
4) Change		.	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	itional sheets, if necessary)	. (Be specific)			
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an amen	dment provides for an exc for implementing the am	change, reclassificat	ion, or cancellation	of issued shares,	
(if not	applicable, indicate N/A)	ienament ii not com	iaineu in the ameno	iment useu:	
(9					
			 -		

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file a	late)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without sha action was not required.	reholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following the separately provided for each voting group entitled to vote separately on the amend	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by" (voting group)	
Dated	
Signature Vileus St.	_
(By a director president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee,	
appointed fiduciary by that fiduciary)	
NERIO J LUCES RAMIREZ	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)