

650330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

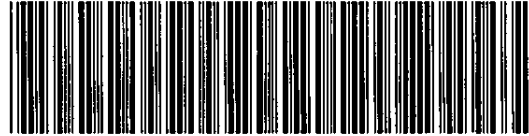
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 MAY 18 AM 10:15
RECEIVED
GENERAL INVESTIGATIVE
DIVISION
STATE OF MISSISSIPPI

MAY 22 2015
C LEWIS



HEITMAN LAW FIRM, P.L.

ЛЛЕОСЕСМЭ ЛЛОЛ СЕВНОКЕЛЛДЛДЛ

240 10th Street
West Palm Beach, FL 33401

Gilmer M. Heitman, P.E.
Attorney at Law
(561) 249-2879 (office)
(941) 266-7610 (cell)
(561) 249-2906 (fax)
GMH@palmbeachconstructionlaw.org
ss@palmbeachconstructionlaw.org

May 15, 2015

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

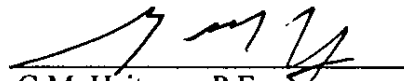
RE: Amendment of Articles of Incorporation
AFG Construction Services, Inc.
Our File No.: 2015016.001

Dear Sir/Madam:

Enclosed, please find our firm check in the amount of \$43.75 as the filing fee for the above-referenced amendment and for Certificate of Status, along with the originally-executed Amendment to Articles of Incorporation. In addition, we are enclosing a self-addressed, stamped envelope for your convenience in providing us with the Certificate of Status.

Should you require any additional information or documentation from us, please do not hesitate to contact me.

Sincerely,


G.M. Heitman, P.E.
Attorney at Law

GMH:ss
Enc. (2)
cc: Kris Mercado (via email)

GILMER M. HEITMAN, P.E.
ATTORNEY AT LAW



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: AFG CONSTRUCTION SERVICES, INC.

DOCUMENT NUMBER: G50330

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gilmer M. Heitman, Esq.
Name of Contact Person
Heitman Law Firm, PL
Firm/ Company
240 10th Street
Address
West Palm Beach, FL 33401
City/ State and Zip Code

gmh@palmbeachconstructionlaw.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gilmer M. Heitman, Esq. at (561) 249-2879
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:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|--|--|--|

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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

STATE OF FLORIDA
DEPARTMENT OF REVENUE

AFG CONSTRUCTION SERVICES, INC.

15 MAY 18 AM 10:15

(Name of Corporation as currently filed with the Florida Dept. of State)

G50330

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

ARNOLD CONSTRUCTION SERVICES, INC.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

3586 185th Trail North

Loxahatchee, FL 33470

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Arnold Abramson

3586 185th Trail North

(Florida street address)

New Registered Office Address: Loxahatchee, Florida 33470
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature 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.

Example:

Change PT John Doe
 Remove V Mike Jones
 Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Arnold Abramson</u>	<u>3586 185th Trail North</u> <u>Loxahatchee, FL 33470</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>RA</u>	<u>Alain Garreaud</u>	<u>3500 NW Boca Raton Blvd.</u> <u>Suite 616</u> <u>Boca Raton, FL 33431</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>RA</u>	<u>Arnold Abramson</u>	<u>3586 185th Trail North</u> <u>Loxahatchee, FL 33470</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

May 7, 2015

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 date)

RECEIVED
DIVISION OF CORPORATIONS
15 MAY 18 AM 10:16

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 05/08/15

Signature 

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Arnold Abramson

(Typed or printed name of person signing)

President

(Title of person signing)