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SECRETARY OF STATE

AJR: 6/17/09

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: AR CON Engineering Group, ine.
DOCUMENT NUMBER: \$\psi 01000038069\$
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ASNER CAPLante Name of Contact Person
ARcon Engineering GnouP, inc Firm/Company
1175 N.E. 125th Street #215
Miami FL. 3316/ City/ State and Zip Code
ARconEngineering of Comcast-Net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ADNER LAPLante at (786) 285-0366 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 Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to

Articles of Incorporation of

FILED

ARCON Engineeri	ing GrouP, in	2009 JUN 15 PM 3: 50 a Dept. of SSRERETARY OF STATE WD)
(Name of Corporation as cur	regitly filed with the Florid	a Dept. of Selection
\$ 010000 38069		THE LAHASSEE FLORE
(Document Nu	umber of Corporation (if kno	wn)
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation:		lorida Profit Corporation adopts the following
A. If amending name, enter the new name	of the corporation:	
Same		The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "p.	he designation "Corp," "Inc	c," or "Co". A professional corporation
B. <u>Enter new principal office address, if ap</u> (Principal office address <u>MUST BE A STRE</u>	pplicable: //72 EET ADDRESS)	N.E. 125 th. Street # 213 m; FL. 33161
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		me
D. If amending the registered agent and/or		n Florida, enter the name of the
new registered agent and/or the new re-	gistered office address:	
Name of New Registered Agent:	Same	
		
New Registered Office Address:	(Florida street a	address)
	, i	
	<u>Same</u> (City)	Florida(Zip Code)
	(City)	(Lip Code)
New Registered Agent's Signature, if change	ging Registered Agent:	
hereby accept the appointment as registered	l agent. I am familiar with a	and accept the obligations of the position.
hereby accept the appointment as registered	agent. I am familiar with a	nd accept the obligations of the position.

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)

Title	Name	Address	Type of Action
2a <u>surer</u>	Gollaville K. Rao	1809 SW 87 ferr. Davie, Fl. 33324	Add Remove
cretary	Gollaville F. Rao	1809 SW 87 Lerr. Davie, FL. 33324	Z Add ☐ Remove
			☐ Add ☐ Remove
	or adding additional Articles, enter ional sheets, if necessary). (Be speci		
provisions	dment provides for an exchange, rec for implementing the amendment if applicable, indicate N/A)		
		'/A	

The date of éach amendment(s) adoption: 6/1/2009				
3 4	(date of adoption is required)			
Effective date if applicable:	more than 90 days after amendment file date)			
(no	more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.			
	proved by the shareholders through voting groups. The following statement reach 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	ting group)			
(voi	ting group)			
action was not required.	lopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder			
Dated 6/	11/2009 Mer/Tap/ante			
Signature <u>Al</u>	mer/190/aute			
(By a di	rector, president or other officer – if directors or officers have not been			
	l, by an incorporator – if in the hands of a receiver, trustee, or other court			
appoint	ed fiduciary by that fiduciary)			
	ADNER LAPLante (Typed or printed name of person signing)			
	(Typed or printed name of person signing)			
_	(President)			
	(Title of person signing) /			