## POUCCE 8784

| (Re                     | questor's Name)           | ·               |
|-------------------------|---------------------------|-----------------|
| (Ad                     | dress)                    |                 |
| (Ad                     | dress)                    |                 |
| (Cit                    | y/State/Zip/Phone         | <del>)</del> #) |
| PICK-UP                 | ☐ WAIT                    | MAIL            |
| (Bu                     | sine <b>ss</b> Entity Nan | ne)             |
| (Do                     | cument Number)            |                 |
| Certified Copies        | _ Certificates            | of Status       |
| Special Instructions to | Filing Officer:           |                 |
|                         |                           |                 |
|                         |                           |                 |
|                         |                           |                 |
|                         |                           |                 |





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02/23/10--01007--026 \*\*43.75

SECRETARY OF STATE.

10 FEB 23 PM 2: 16

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR                | ATION:TI                                   | ER ONE CONSTRUCTION   | N INC.  |
|-------------------------------|--|---|---|
| DOCUMENT NUMBER: P0900008984  |  |   |   |
| The enclosed Articles of      | of Amendment and fee a                     | re submitted for filing.  |   |
| Please return all corres      | pondence concerning thi                    | s matter to the following:  |   |
| ,<br>                         |  | CHELLE SWEATT   |   |
|                               | N  | ame of Contact Person   |   |
|                               | BUSIN                                      | NESS SUPPORT INC.   |   |
|                               |  | Firm/ Company   |   |
| 417 S                         |  | STOWE AVE, STE. A   |   |
|                               |  | Address   |   |
|                               | ORAN                                       | NGE PARK, FL 32073  |   |
|                               | C  | ity/ State and Zip Code   |   |
|                               | michelle@<br>E-mail address: (to be use    | bizsupportinc.com d for future annual report notification)          |   |
| For further information       | concerning this matter,                    | please call:  |   |
| MICHE                         | LLE SWEATT                                 | at ( 904 ) 26   | 4-1289  |
| Name of C                     | ontact Person                              | Area Code & Daytime Tele  | phone Number  |
| Enclosed is a check for       | the following amount m                     | nade payable to the Florida Departi                                 | ment of State:  |
| □ \$35 Filing Fee [           | \$43.75 Filing Fee & Certificate of Status | ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Addre<br>Amendment Se |  | Street Address Amendment Section                                    |   |
| Division of Co                |  | Division of Corporations  |   |
| P.O. Box 6327                 | 22214                                      | Clifton Building  | _   |
| Tallahassee, FL               | . 32314                                    | 2661 Executive Center Circle  | <b>;</b>  |

Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation** of

# TOTOFER 23 PM 2: 16

## TIER ONE CONSTRUCTION INC.

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

### P09000008984

(Document Number of Corporation (if known)

wing

|  | of the corporation   | _   |                         |                           |
|--|--|---|-------------------------|---------------------------|
|  | VESTING, INC   |   | 21 444                  | _The net                  |
| name must be distinguishable and contain<br>abbreviation "Corp.," "Inc.," or Co.," or ti<br>name must contain the word "chartered," "p | he designation "Co   | orp, " "Inc, " or "C                              | Co". A professional co  | a or in<br>orporatio      |
| B. Enter new principal office address, if ap   | oplicable:   | N/A   |                         | _                         |
| (Principal office address <u>MUST BE A STRE</u>  |  |   |                         |                           |
|  |  |   |                         |                           |
|  |  |   |                         | _                         |
| C. Enter now weiling address if anniesh  | lo.  |   |                         |                           |
| C. Enter new mailing address, if applicab<br>(Mailing address MAY BE A POST OFF  |  |   |                         |                           |
| maning address may be a real or i  | FICE BOX)  | N/A   |                         | _                         |
| (maining address <u>MAI DE ATOST OF I</u>  | FICE BOX)  | N/A   |                         | -                         |
| (maning address <u>MAT DE A POST OF T</u>  | FICE BOX)  | <u>N/A</u>  |                         | -                         |
| (maning address <u>MAT DE A POST OF I</u>  | FICE BOX)  | N/A   |                         | -<br>-<br>-               |
| D. If amending the registered agent and/o  | r registered office  | address in Florid                                 | a, enter the name of th | -<br>-<br><u>-</u>        |
|  | r registered office  | address in Florid                                 | a, enter the name of th | -<br>-<br>-<br>1 <u>e</u> |
| D. If amending the registered agent and/o  | r registered office  | address in Florid                                 | a, enter the name of th | -<br>-<br>-<br>1 <u>e</u> |
| D. If amending the registered agent and/or<br>new registered agent and/or the new re   | r registered office<br>gistered office add                   | address in Florid                                 | a, enter the name of th | -<br>-<br>n <u>e</u>      |
| D. If amending the registered agent and/or new registered agent and/or the new re  | r registered office<br>gistered office add<br>N/A            | address in Florid                                 | a, enter the name of th | -<br>-<br>-<br>1 <u>e</u> |
| D. If amending the registered agent and/or<br>new registered agent and/or the new re   | r registered office<br>gistered office add<br>N/A            | address in Florid<br>Iress:                       |                         |                           |
| D. If amending the registered agent and/or new registered agent and/or the new re  | r registered office<br>gistered office add<br>N/A<br>(Floria | address in Florid<br>lress:<br>da street address) | <br>, Florida           |                           |
| D. If amending the registered agent and/or new registered agent and/or the new re  | r registered office<br>gistered office add<br>N/A            | address in Florid<br>lress:<br>da street address) |                         |                           |

## It 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)

| <u>Title</u>  | Name   | Address   | Type of Action                            |
|---------------|--|---|---|
|               | N/A  |   |   |
| <del></del> - |  |   | ☐ Add ☐ Remove                            |
|               |  |   |   |
|               | nding or adding additional A<br>additional sheets, if necessary,                         | rticles, enter change(s) here:  ). (Be specific)                                |   |
|               |  |   |   |
|               |  |   |   |
| <u>provis</u> | nmendment provides for an estions for implementing the aid not applicable, indicate N/A) | exchange, reclassification, or cancella<br>mendment if not contained in the amo | tion of issued shares,<br>endment itself: |
| N/A           |  |   |   |
|               |  |   |   |
|               |  |   |   |
|               |  |   |   |

| The date of each amendmen                         | t(s) adoption: 2/16/2010  |
|---|---|
| •   | (date of adoption is required) N/A  |
| Effective date if applicable:                     | (no more than 90 days after amendment file date)  |
| Adoption of Amendment(s)                          | ( <u>CHECK ONE</u> )  |
| The amendment(s) was/we by the shareholders was/w | ore adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.   |
|   | ere approved by the shareholders through voting groups. The following statement and 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)  |
|   | (voting group)  |
| The amendment(s) was/we action was not required.  | ere adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/we action was not required.  | ere adopted by the incorporators without shareholder action and shareholder   |
| Dated   | 02.17.10  |
| √By<br>sele                                       | a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
|   | (Typed or printed name of person signing)   |
|   | (Title of person signing)   |