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Amendais

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## **COVER LETTER**

TO: Amendment Section Division of Corporations Cubico Construction Corporation. The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Cubico Construction Corp. 04 NE 18 street City/ State and Zip Code ERHAN. Cubico @ amail. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & Certificate of Status □ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is **Certified Copy** enclosed) (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**

	on as currently filed with the FI	oridd Dept. of State)
	nent Number of Corporation (if kr	nown)
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this <i>Florida Profit Cor</i>	poration adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	," "Inc," or "Co". A profession	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
(Principal office undress MOST BE A STREET ADI	<u></u>	
		70 3
		The state of the s
C. Enter new mailing address, if applicable:		(5) (5) bear
(Mailing address MAY BE A POST OFFICE BO	<u></u> )	<u> </u>
		3
		<u> </u>
	<del></del>	60
D. If amending the registered agent and/or register		ter the name of the
new registered agent and/or the new registered	office address:	
Name of New Registered Agent	*	
		±21
	(Florida street address)	
New Registered Office Address:		, Florida
HELP RESISTENCY OF PROPERTY.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg		
I hereby accept the appointment as registered agent.	I am familiar with and 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)

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: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> Name	<u>Addres</u> s
1) Change	V LUZM. HEAlY	1804 NE 18 Street Ft Louderdale, FL
X Add		It Louderdale, FL
Remove		33305
2) Change		
Add		
Remove		
3) Change		
Add		- 18
Remove		
4) Change		
Add		
Remove		
5) Change		
5) Change		
Add		
Remove		Martin Control of the
6) Change		
Add		
Remove		

tach additional sheets, if necessary)	rticles, enter change . (Be specific)			
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The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	a(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"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.	lder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature	
(by a director, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	
Hernon Rougen! (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	