P13000031291

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13 JUL 24 AM 10: 18
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

C. LEWIS

JUL 26 2013

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corpor	rations		
NAME OF CORPOR	ATION: BEST USA	CONSTRUCTION	ONS INC
DOCUMENT NUMBI	D4000000400		
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
!	MARIO MORO B	ATISTA	
-		Name of Contact Persor	1
<u> </u>	BEST USA CON	STRUCTION IN	C
		Firm/ Company	
1	8001 NW 7 ST A	PT 20	
_		Address	
1	MIAMI FL 33126		
_		City/ State and Zip Code	e
SOF	PHIA@SOLASITI	RADE COM	
	_	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
MARIO MOR	O BATISTA	at (_786	, 556-7003
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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 Address		Street Address	
Amendment Section		Amendment Section	
Division of Corporations			on of Corporations
	Box 6327		Building
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 13 JUL 24 AM 10: 18 SECRETARY OF STATE

BEST USA CONSTRUCTION INC

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

P-13000031291	in the Florida Dept. of State)
(Document Number of Corpo	ration (if known)
ursuant to the provisions of section 607.1006. Florida Statut s Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendmen
. If amending name, enter the new name of the corporat	tion:
BEST USA CARPENTERS INC	The new
	poration," "company," or "incorporated" or the abbreviation ; " or "Co". A professional corporation name must contain the viation "P.A."
3. Enter new principal office address, if applicable:	N/A
Principal office address <u>MUST BE A STREET ADDRESS</u>)
	·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
(Mutting uturess MAT BE A POST OFFICE BOX)	
	
	
. If amending the registered agent and/or registered off	
new registered agent and/or the new registered office	address:
Name of New Registered Agent N/A	
(FI	lorida street address)
New Registered Office Address:	Florida (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: X Change	PŢ	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change		· · · · · · · · · · · · · · · · · · ·	8001 NW 7 ST APT 20
Add			
Remove			
2) Change		_	
Add			
Remove	·		
3)Change			
Add			
Remove			
4) Change	·		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A)	or cancellation of issued shares, d in the amendment itself:	If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
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(if not applicable, indicate N/A)		If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
		(if not applicable, indicate N/A)	idinois is not contained in the amendment users.
		.	

The date of each amendment(s) adoption:, if other then the
date this document was signed. 13 JUL 24 AM ID: 18
Effective date if applicable:
Effective date if applicable: (no more than 90 days after amendment file date) SECRETARY OF STATE TALLAHASSEE, FLORIDA
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)
(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 07-17-2013
Signature V
(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)
MARIO MORO BATISTA
(Typed or printed name of person signing)
PRESIDENT

(Title of person signing)