## P19000000808

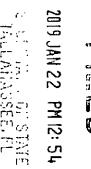
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	S GAL	AXY CONSTRUCTION I	NC
DOCUMENT NUMBER:		P1900000808	
The enclosed Articles of Amendmen	n and fee are su	ibmitted for filing.	
Please return all correspondence con	cerning this ma	itter to the following:	
	ED	UARDO JOSE VIETO MI	ZZΛ
	6	Name of Contact Person	9
		Firm/ Company	
		10821 SW 144TH AVE	
		Address	
		MIAMI, FL 33186	
		City/ State and Zip Cod	e
		eduardomeza@gmail.co	om ·
E-mail ac	ddress: (to be u	sed for future annual report	notification)
For further information concerning the	his matter, pleas	se call:	
EDUARDO JOSE VIETO MEZA		786 at (	580-7126
Name of Contact Pers	son	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following	g amount made	payable to the Florida Depa	irtment of State:
	Filing Fee & cate 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 Amendment Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	rations	Amend Divisio Clifton	Address ment Section of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

5	GALAXY CONSTRUCTION INC	2019 JAN 22 PM 12: 54
(Name of Corpo	ration as currently filed with the Flori	da Dept. of State)
	ration as currently filed with the Flori P19000000808	THE TAXABLE STATE
(Do	ocument Number of Corporation (if know	m)
Pursuant to the provisions of section 607.1006, Floris Articles of Incorporation:	orida Statutes, this Florida Profit Corpor	ration adopts the following amendment(s) t
a. If amending name, enter the new name of th	e corporation:	
	S GALAXY COMPANY INC	The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	Torp, " "Inc," or "Co". A professional	"incorporated" or the abbreviation
3. Enter new principal office address, if applications of the principal office address MUST BE A STREET.		
		<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u> )	
If amending the registered agent and/or registered agent and/or the new register		the name of the
Name of New Registered Agent	<del></del>	
	·	
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing	Registered Agent:	
hereby accept the appointment as registered ager		ligations of the position.
	Signature of New Registered Agent, if che	anging
• 1	agamare of non-regimered agent, if the	*** * * * * * * * * * * * * * * * * *

## 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
i) Change			
Add			
Remove			
2) Change		<del>-</del>	
Add			·
Remove			
3 ) Change			· .
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
	-
	<u> </u>
	<del></del>
	· · · · · · · · · · · · · · · · · · ·
f an amendment provides for an eye	change reclassification or cancellation of issued shares
provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself;
provisions for implementing the amo	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date volepartment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
01/16/20 Dated	19	
Signature	Ediandoffler	
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	EDUARDO JOSE VIETO MEZA	
	(Typed or printed name of person signing)	<del></del> -
	PRESIDENT	
	(Title of person signing)	