## 300014

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Holland Builders, Inc. DOCUMENT NUMBER: 300014 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Dena Auletto Name of Contact Person Saavedra-Goodwin Firm/ Company 312 S.E. 17th Street, 2nd Floor Address Fort Lauderdale, Fl 33316 City/ State and Zip Code dauletto@saavlaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Dena Auletto Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of S	tate)
300014	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts tits Articles of Incorporation:	he following amendment(s) to
A. If amending name, enter the new name of the corporation:	
water the new name of the corporation.	
manufaction of the first control of the first contr	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name is "chartered," "professional association," or the abbreviation "P.A."	abbreviation "Corp., nust contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
<u> </u>	70
C. Entar non-mailing address if anotherbles	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ί, ·-
<del></del>	<del></del>
	••
D. If amonding the registered agent and/or registered off.	. C
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	<u>the</u>
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: Flori	da
(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	
стоску воссух то вругиничен вы гедіметев адет. — гат зативат with and ассері те обиданоня оз то	е ромноп
Signature of New Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

 $P \sim President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR \sim Trustee; C= Chairmon or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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>	<u>Addres</u> s
1) Change	COO/S	Warren D. Kroeppel	4860 N.E. 12th Avenue
Add			Fort Lauderdale, FL 33334
X Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>additio</i>	r adding additional nal sheets, if necessa	ry). (Be specific.	<u>ange(s) nere;</u> )			
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If an amendm	ent provides for an	exchange, reclass	ification, or can	cellation of issue	d shares.	
<u>provisions</u> fo	r implementing the plicable, indicate N4	amendment if not	t contained in th	e amendment its	elf:	
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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)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
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 east for the amendment(s) was/were sufficient for approval
by"
Signature  (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)  (Typed or printed name of person signing)  (Title of person signing)