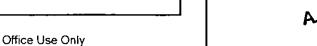
493346

(Requestor's Name)
(Address)
(Address)
(1881000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Codified Conice Codificator of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

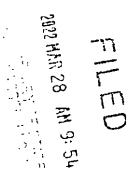




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A RAMSEY APR 1 2 2022

COVER LETTER

TO: Amendment Section Division of Corporations

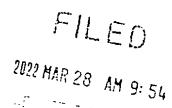
Tallahassee, FL 32314

NAME OF CORPO	ORATION: C.W. Roberts Con	tracting, Incorporated	<u></u>
DOCUMENT NUN			
	es of Amendment and fee are su	abmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	Robert Delisle		
		Name of Contact Person	
	C.W. Roberts Contracting, Ir	ncorporated	
		Firm/ Company	
	3372 Capital Circle NE	. ,	
		Address	
	Tallahassee, FL 32308		
		City/ State and Zip Code	
	bdelisle@cwrcontracting.com	n	
	•	sed for future annual report	notification)
	2 ///// 300/100/. (13) 50 2.		,
For further informati	on concerning this matter, plea	se call:	
Robert Delisle		850	385-5060
Name	e of Contact Person	at (<u>850</u>	_)le & Daytime Telephone Number
Enclosed is a check t	for the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di	ailing Address nendment Section vision of Corporations D. Box 6327	Amend Division	Address ment Section n of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



C.W. Roberts Contracting, Incorporated

(Name	of Corporation as current	tly filed with the Florida Dept. of State)
493846		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
	Corp," "Inc," or "Co".	The new 'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address,		3660 Hartsfield Road
(Principal office address <u>MUST BE A S</u>		Tallahassee, FL 32303
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		
D. If amending the registered agent an new registered agent and/or the ne		
Name of New Registered Agent		
	3660 Hartsfield Road	
	(Florida si	reet address)
New Registered Office Address:	Tallahassee	. Florida 32303
		(City) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen tered agent. I am familiar	t: with and accept the obligations of the position.
	Signature of New I	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)

Example:

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,

X Change	<u>PT</u> <u>Joh</u>	nn Doe		
X Remove	<u>V</u> <u>Mi</u>	Mike Jones		
X Add	<u>SV</u> <u>Sal</u>	ly Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) X Change	<u>C</u>	Ned N. Fleming	P.O Box 16279	
Add			Tallahassee, FL 32317	
Remove				
2) Change	CEO	Fred J. Smith, III	P.O Box 16279	
X Add			Tallahassee, FL 32317	
Remove 3) X Change	S	Robert Delisle	P.O Box 16279	
Add			Tallahassee, FL 32317	
Remove				
4) Change	CEO	Charles E.Owens	P.O Box 16279	
Add			Tallahassee, FL 32317	
X Remove				
5) Change	<u>v</u>	Gregory A. Hoffman	P.O Box 16279	
X Add			Tallahassee, FL 32317	
Remove				
6) Change	<u>v</u>	William T. Castleberry	P.O Box 16279	
Add			Tallahassee, FL 32317	
X Remove				

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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	AS	J. Ryan Brooks	P.O. Box 16279
XAdd			Tallahassee, Fl. 32317
Remove			
2) Change	V	Darryl C. Finch	P.O. Box 16279
X Add			Tallahassee, Fl. 32317
3) X Remove	VAS	Matthew Steele	P.O. Box 16279
Add			Tallahassee, FL 32317
Remove			
4) X Chang	P	Robert P. Flowers	P.O. Box 16279
Add			Tallahassee, FL 32317
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	amending or adding additional Articles, enter change(s) here: .ttach additional sheets, if necessary). (Be specific)
	· · · · · · · · · · · · · · · · · · ·
<u>] [</u>	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)
_	

The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file dat	(e)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requireme bepartment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	lopted by the incorporators, or board of directors without share	cholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the a ufficient for approval.	mendment(s)
	proved by the shareholders through voting groups. The follow reach voting group entitled to vote separately on the amendm	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
3/24/2022		
Dated	Rotat Deliale	
Signature		
(By a c selecte	director, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, onted fiduciary by that fiduciary)	
	Robert Delisle	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	