F38118

(Re	equestor's Name)	.
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	ocument Number)	
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Amend 10.13.14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TWO BROTHERS CONSTRUCTION, INC. DOCUMENT NUMBER: F38178				
	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
(CANDY BROWN	LOW		
	JOHN P. MAAS	Name of Contact Person	1	
Firm/ Company 44 N.E. 16 STREET				
<u> </u>	HOMESTEAD, F			
		City/ State and Zip Code	e	
DON	NABATEMAN3	@AOL.COM ed for future annual report		
	E-mail address: (to be us	ed for future annual report	nonneation)	
For further information	concerning this matter, pleas	e call:		
CANDY BRO	WNLOW	at (305	247-7132	
Name of	Name of Contact Person Area Code & Daytime Telephone Nu		de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department 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)	
Amen Divisi P.O. E	ng Address dment Section on of Corporations dox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle	

Articles of Amendment to Articles of Incorporation of

TWO BROTHERS CONSTRUCTION, INC.

	currently filed with the Flo	orida Dept. of State)	_
F38178			
(Documer	nt Number of Corporation (if	known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>F</i>	Clorida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
N/A			The new
	ation "Corp," "Inc," or "C	" "company," or "incorporated" or the coor. A professional corporation name must	abbreviation
, .		N/A	
B. Enter new principal office address, (Principal office address MUST BE A ST			_
			- ,
			- 🗲 😘
C. Enter new mailing address, if appli	cable:	N/A	14 OCT -6 FH 25 23
(Mailing address MAY BE A POST (IN/A	- 1
			_
			- % .
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the name of the	; 5
	N/A		
Name of New Registered Agent	11//7		
	(Florida stree	et address)	
New Registered Office Address:	(City)	, Florida(Zip Code)	_
	(Cuy)	(Zip Code)	
New Registered Agent's Signature, if cl			
I hereby accept the appointment as registe	ered agent. I am familiar wi	th and accept the obligations of the position.	
Sic	reature of New Pagistared Ac	zant if ahanaina	

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 <math>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 Do	<u>0e</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	VD		DONNA BATEMAN	3150 Fairways Drive
Add				Homestead, FL 33035
Remove				
2) Change				
\ \Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add	•	-		
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
	,
	· · · · · · · · · · · · · · · · · · ·
If an amandment municipae for an avail-	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis of the samendment itself:
(if not applicable, indicate N/A)	
I/A	
	,

The date of each amendment(s) add date this document was signed.	option:	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number of votes cast for the amendment(s) licient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	,,,	
	(voting group)	
The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder	
_{Dated} Septemb	er 3O , 2014	
Signature	Pal	
(By a dir selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
5	STEVEN BATEMAN	
****	(Typed or printed name of person signing)	
F	PRESIDENT-DIRECTOR	
-	(Title of person signing)	