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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Springer Constru	ction, Inc.	
DOCUMENT NUMB	BER:		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Lisa Eldridge		
•	· -	Name of Contact Person	n
	Springer Construction, Inc.		
		Firm/ Company	
	PO Box 1801	Prop	
,		Address	
	Lakeland, FL 33840	, 155251	
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	e
	^		
office	manager@springerconstructi		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Lisa Eldridge		at (863	
Name o	of Contact Person	Area Co	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)
Ame Divis P.O.	ling Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current					
	ly filed with the Florid	a Dept. of State	<u>e</u>)		
170047					
(Document Number of	of Corporation (if known)			
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corpora	tion adopts the	followin	g ame	ndment(
. If amending name, enter the new name of the corporation:					
N/A				The	new
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or 'ord "chartered," "professional association," or the abbreviation	"Co". A professional c				
. Enter new principal office address, if applicable:	NA				
Principal office address MUST BE A STREET ADDRESS)			5 (1) 6 (1)	(S)	
				(6	
			<u> </u>		
Enter new mailing address, if applicable:	, ,		(4) - 	772- 115	77
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>			78	$\frac{\circ}{-}$
. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		he name of the			
		he name of the		_	
new registered agent and/or the new registered office address		he name of the			
<u>Name of New Registered Agent</u>		he name of the		-	
<u>Name of New Registered Agent</u>	s: N/A	he name of 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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>S</u>	Emily M Springer	PO Box 1801
Add			Eaton Park, FL 33840
X Remove			
2) Change	VP	Jeremy D Voss	PO Box 1801
X Add			Eaton Park, FL 33840
Remove			
3) Change	-		
Add			-
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

-mach addill	or adding additions onal sheets, if neces:	sary). (Be speci	fic)			
N/A						
						•
<u> </u>						
			<u> </u>			
				,	<u> </u>	
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f an amendi	nent provides for a	n exchange recl:	essification or ca	ncellation of iss	ued shares	
<u>provisions f</u>	or implementing th	e amendment if i	not contained in	the amendment	itself:	
(if not a	pplicable, indicate N	∛ A)				
N/A						
·						
				·		
-				<u>-</u>		<u> </u>
		· · · · · · · · · · · · · · · · · · ·				<u> </u>

The date of each amendment(s) as	July 27, 2018 doption:	, if other tha
date this document was signed.	•	 -
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	I not be listed :
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
• •	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
August 13	3, 2018	
Dated	y/ /	
Signature		
	lirector, president or other officer - if directors or officers have not been	<u> </u>
	d. by an incorporator – if in the hands of a receiver, trustee, or other court	
appoin	ited fiduciary by that fiduciary)	
	Cole H Springer	
	(Typed or printed name of person signing)	
	Vice President	