# N50394

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#### **COVER LETTER**

Division of Corporations Construction Inc. NAME OF CORPORATION DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: City/ State and Zip Code For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: 🛈 835 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

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

### Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment

	10			
	Articles of Inco	rporation		
Custom Built Mar	ine Con	struction	Toc	
(Name of Corpo	ration as currently	filed with the Florid:	Dept. of State	) I.S. 28.
L50394				
(De	ocument Number of	Corporation (if known	)	100 2
Pursuant to the provisions of section 607.1006, Flo is Articles of Incorporation:	orida Statutes, this F	lorida Profit Corporal	tion adopts the f	
A. If amending name, enter the new name of th	ie corporation:			
				Thenew
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "I "chartered," "professional association," or the al	nc. " $or$ " $Co$ ". $A$	professional corporat	ion name must	contain the word
3. Enter new principal office address, if applica Principal office address <u>MUST BE A STREET A</u>				·
2. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	ROY			
	<u> </u>			
). If amending the registered agent and/or reginew registered agent and/or the new register	stered office addreseed office address:	ss in Florida, enter th	e name of the	
Name of New Registered Agent				<del></del>
	(Florida street	t address)		
New Registered Office Address:			Florida	
	·C	'ity)	Florida	(Zip Code)
ew Registered Agent's Signature, if changing R	Registered Agent:			
hereby accept the appointment as registered agent	t. – Lam familiar wit	h and accept the obliga	ations of the pos	ition.

Signature of New Registered Agent, if changing

Check if applicable

 $\Box$  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 = 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> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>S_</u>	Sabrina D Butter	3119 Hammond Rd
_X_ Add			Fort Pierce F1 34946
Remove			
2) Change			
Add			<del></del> _
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art	icles, enter change(s) here:
(Attach additional sheets, if necessary).	
N/A	
	<del></del>
<del>-</del>	<u> </u>
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ij nor appricame, marcaie 1872)	
NIA	
<del></del>	

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: August 1/ 2022	
Effective date if applicable: 1-tugust 1/2022 (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 document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	etion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	ut(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
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 co	 1 urt
appointed fiduciary by that fiduciary)	
Touid H Corrigan JR (Typed or printed name of person signing)	
President	
(Title of person signing)	