## N18225

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ad                     | dress)             |           |
| (Ad                     | ldress)            |           |
| (Cit                    | ty/State/Zip/Phone | #)        |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | isiness Entity Nam | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

| The Martin Build NAME OF CORPORATION:                     |  |                     |  |
|---|--|---------------------|--|
|   |  |                     |  |
| DOCUMENT NUMBER:  |  |                     |  |
| The enclosed Articles of Amendment and fee are s          | submitted for filing.  |                     |  |
| Please return all correspondence concerning this m        | natter to the following:   |                     |  |
| Mark H. Muller  |  |                     |  |
|   | (Name of Contact Pe  | erson)              |  |
| Mark H. Muller, P.A.                                      |  |                     |  |
|   | (Firm/ Company   | y)                  |  |
| 5150 Tamiami Trl N Ste 303                                |  |                     |  |
|   | (Address)  |                     |  |
| Naples, FL 34103  |  |                     |  |
|   | (City/ State and Zip   | Code)               |  |
| Accounting@marzuccosconstruction.com                      |  |                     |  |
|   | used for future annual re  | port notification   | 1)   |
| For further information concerning this matter, ple       | case call:   |                     |  |
| Mark H. Muller  | at   | 239                 | 774-1436   |
| (Name of Contact Per                                      |  | (Area Code)         | (Daytime Telephone Number)                                 |
| Enclosed is a check for the following amount mad          | le payable to the Florida  | Department of       | State:   |
| ■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Stat | & S43.75 Filing Fee us Certified Copy (Additional copy enclosed) | Certif<br>is Certif | 0 Filing Fee icate of Status ied Copy tional Copy is osed) |
| Mailing Address   | St   | reet Address        |  |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

| The Martin Building, Inc.   |  |   |
|---|--|---|
| (Name of Corporation as currently filed with th   | e Florida Dept. of State)                              |   |
| N18225  |  |   |
| (Docur  | ment Number of Corporation (if k                       | 10wn)                                     |
| Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:     | orida Statutes, this <i>Florida Not Fo</i>             | r Profit Corporation adopts the following |
| A. If amending name, enter the new name of th   | e corporation:   |   |
|   |  | The new                                   |
| name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam       |  |   |
| B. Enter new principal office address, if applics (Principal office address <u>MUST BE A STREET</u> ) |  |   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)                   | <i>BOX</i> )   |   |
|   |  |   |
| D. If amending the registered agent and/or reginew registered agent and/or the new register           |  | enter the name of the                     |
| Name of New Registered Agent:   | Mark H. Muller, P.A.                                   |   |
|   | 5150 Tamiami Trl N Ste 303                             |   |
| New Registered Office Address   | -  | orida street address)                     |
|   | Naples   | , Florida <u>34103</u>                    |
|   | (City)   | (Zip Code)                                |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen      | Registered Agent:<br>nt. I am familiar from and accept | the obligations of the position.          |
| -   | Signature of New Registe                               |   |

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 X Remove X Add   | PT         John Do           V         Mike Jo           SV         Sally Sr | <u>nes</u>              |   |  |
|---|--|-------------------------|---|--|
| Type of Action (Check One)  | <u>Títle</u>   | Name                    | Address                                       |  |
| 1) Change Add   | <u>P</u>   | Jerelyn Cobb            |   |  |
| xxx Remove  |  |                         |   |  |
| 2) xxx Change Add   | <u>P</u>   | Joseph M. Marzucco, Sr. | 12455 Collier Blvd.<br>Naples, FL 34116       |  |
| Remove 3) Remove Add Remove   | VP   | Ray Assanti             | 1580 40th Ter. SW, Unit D<br>Naples, FL 34116 |  |
| 4) Change Add   | <u>S/T</u>   | Alison Lanier           | 12455 Collier Blvd.<br>Naples, FL 34116       |  |
| Remove  5) Change Add   | D  | Robert Williams         |   |  |
| 6) Change Add   |  |                         |   |  |
| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) |  |                         |   |  |
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|  |                                       |                                  | 9 p                              |
| The date of each amendment(s) adoption date this document was signed.                    |                                       | ·                                | , if other than the              |
| Effective date if applicable:  |                                       |                                  |                                  |
| 0  | no more than 90 days after            | amendment file date)             |                                  |
| Note: If the date inserted in this block does document's effective date on the Departmen | not meet the applicable st            | atutory filing requirements, thi | s date will not be listed as the |
| accomment a criceria a sure on me to partition   |                                       |                                  |                                  |

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

| There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. |   |  |
|--|---|--|
| Dated _  | May 5, 2021   |  |
| }  | By the chairman or interchairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |  |
|  | Joseph M. Marzucco, Sr.   |  |
|  | (Typed or printed name of person signing)   |  |
|  | President   |  |
|  | (Title of person signing)   |  |