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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: WILLIAMS Masonry INC
DOCUMENT NUMBER: P01000089321
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Charles Williams Name of Contact Person
Williams Masonry TNC Firm/Company
1044 NE 96th AUF Address
Objective FC 3497
E-mail address! (to be used for future annual report notification)
For further information concerning this matter, please call:
Charles Williams at 863 (234-0932) Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigs\square \$43.75 Filing Fee & B\$43.75 Filing Fee & B\$52.50 Filing Fee & Certificate of Status

(Additional copy is

enclosed)

Mailing Address

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

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment

of	
Williams Masones INC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P61000089321	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ng amendment(s) to
A. If amending name, enter the new name of the corporation:	- /
name must be distinguishable and contain the word "corporation" "company," or "incorporated" or the abbreviation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) [O44 D5 96]	AME 2667
Obecehobee FC	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	eth AUE
Overchober 3497	/ (
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	_
(Florida street address)	202 (
New Registered Office Address:, Florida	
(City)	Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	
r	
	_
Signature of New 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>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change				
Add				
Remove				
2) Change			2000 SIC	
Add				:
Remove Change				
Add				
Remove			2	
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add			 	
Remove				

[amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)	
		
		
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an amendment provides for an exch	ange, reclassification, or cancellation of issued shares	2
orovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
		

2-1-20	
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: Z-1-20	
(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 date wildocument's effective date on the Department of State's records.	Il 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 and action was not required.	d shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	2
"The number of votes cast for the amendment(s) was/were sufficient for approval	2020 FEB
by	
(voting group)	် ယ
Dated 2-1-20	PH 2: 2
Signature Cul Will	21
(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 court appointed fiduciary by that fiduciary)	
Charles Williams	
(Typed or printed name of person signing)	·
PUPS,T	
(Title of person signing)	