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(Re	equestor's Name)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
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T. LEMIEUXDEC 2 1 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: MATCON CONST	RUCTION SERVICES, IN	NC.		
DOCUMENT NUMI	BER:				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Marlowe McNabb Machnik, l	P.A.			
		Name of Contact Person	1		
	Marlowe McNabb Machnik, P.A.				
Firm/ Company					
	1560 W. Cleveland St.				
	Address				
	Tampa, FL 3360				
	City/ State and Zip Code				
	josselyn@marlowemcnabb.co	om			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call: at (⁸¹³	251-3013		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fcc & 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)		
Am Div P.O	endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division The C 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303		

Articles of Amendment Articles of Incorporation of

(Name of Corporation as currently filed values) (Document Number of Corporation ursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida</i> s Articles of Incorporation:	ration (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i>	
	Profit Corporation adopts the following amendment
	2.5j.: Corporation adopte the following differential
. If amending name, enter the new name of the corporation:	
	T.
ume must he distinguishable and contain the word "corporation," "company Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profes chartered," "professional association," or the abbreviation "P.A."	y," or "incorporated" or the abbreviation "Corp.," ssional corporation name must contain the word
. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>)	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	第一
. If amending the registered agent and/or registered office address in I	Florida, enter the name of the
new registered agent and/or the new registered office address:	—————————————————————————————————————
Name of New Registered Agent	<u> </u>
(Florida street addre	ess)
New Registered Office Address:	, Florida
(City)	(Zip Code)

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 Do	<u>oe</u>	
X Remove	Y	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	VD	_	RODOLFO MATEOS	353 SILAS CT.
Add				SPRING HILL, FL 34609
x Remove				
2) Change	SD	_	OLGA MATEOS	353 SILAS CT.
Add				SPRING HILL, FL 34609
X Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		-		
Add				
Remove				
6) Change		_		
Add				
Remove				

	sneets, if necessary	rticles, enter change). (Be specific)			
		-			
-		<u> </u>			
					
			<u></u> .		
					
					
	<u> </u>				
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					<u> </u>
	provides for an av	change reclassifica	tion or cancellation	n of issued charge	
an amendment		THE PERSONNER	tained in the amen	dmant itself:	
an amendment	provides for an ex	nendment if not con		umem naem.	
provisions for im	<u>nplementing the</u> an	nendment if not con			
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provisions for in	<u>nplementing the</u> an	nendment if not con			

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
■ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the am ufficient for approval.	nendment(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendmen	ng statement nt(s):
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selecte	director, president or other officer – if directors or officers have ed, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	not been other court
	DEREK MATEOS	
	(Typed or printed name of person signing)	
	President Chairman Director	
	(Title of person signing)	

. . .