P02000078708

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	#)
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SECRETARY OF STATE
DIVISION OF CORRORATIONS

13 JAN 28 PM 2: 20

Amend

JAN 3 1 2013

T. BROWN

COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: MULLIGAN CONTRACTING, INC. P02000078708 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LYNN ADAMS Name of Contact Person IT'S YOUR MONEY, LLC Firm/ Company 2768 SR A1A # 308 Address ATLANTIC BEACH, FL 32233 City/ State and Zip Code ITZYOURMONEY@COMCAST.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: LYNN ADAMS Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$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

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



MULLIGAN CONTRACTING, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P02000078708

ment(s) to

(Document Number	er of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Flaits Articles of Incorporation:	orida Statutes, this <i>Florida Pro</i>	fit Corporation adopts the following am	iendme
A. If amending name, enter the new name of the	he corporation:		
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co". A pro	uny," or "incorporated" or the abbrev	e new viation ain the
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE			
D. If amending the registered agent and/or reg new registered agent and/or the new registe		ida, enter the name of the	
Name of New Registered Agent			
 	(Florida street address)		
New Registered Office Address:	(City)	, Florida(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered Agent: ont. I am familiar with and acc	cept the obligations of the position.	

Signature of New Registered Agent, if changing

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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	ROBERT DAVID SINGLETARY	856 CRYSTAL SPRINGS WAY
Add			SAINT AUGUSTINE, FL 32092
X Remove			
2) Change			
Add			··· ·· ·· · · · · · · · · · · · · · ·
Remove			
3) Change			
Add			
Remove			
4) Change			
Add	•		-
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necess	ary). (es, enter char (Be specific)				
						
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f an amendment provides for an provisions for implementing the	<u>1 exchar</u> e amend	ige, reclassifi Iment if not c	cation, or can catained in	ancellation the amend	of issued shares	و
(if not applicable, indicate N	VA)					
	_				,	
	06	STOUR	were	ever	1554ed	
	06	STOUC	were	ever	1554ed	
	06	STOUL	Were	ever	issued.	
	<i>DF</i>	STOUL	Were	ever	issued.	
	<i>DE</i>	STOUL	Were	ever	issued.	
	- DE	STOUL	Were	ever	issued.	
N/A NO Shares		STOUL	Were	ever	issued.	
	06	STOUL	Were	ever	155ued	

The date of each amendment(s) adoption: 10/1/2012
Effective date <u>if applicable</u> :	10/1/2012
<u>ruppicusie</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	25/13
Signature 2	which's Multigan
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	PATRICK E. MULLIGAN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)