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SECRETARY OF STATE

Amend 03/3/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION: Bob Alle	en Complete Systems,Con	tracting, Inc.		
DOCUMENT NU	MBER:P03000014	400			
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all co	rrespondence concerning thi	s matter to the following:			
	Robert	Allen, President			
	N	ame of Contact Person			
	Bob Allen Comple	ete Systems Contracting,	, Inc.		
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·		
	120 East Oa	akland Park Blvd. #105			
•	Address				
	Fort Laud	dordolo Elonido 22224			
	Fort Lauderdale, Florida 33334 City/ State and Zip Code				
		•			
<u> </u>		sweet@bellsouth.net I for future annual report notification)	Manadana II Maraa		
	tion concerning this matter,	please call:			
Robert All	· · · · · · · · · · · · · · · · · · ·	at (954) 854-35			
Name	of Contact Person	Area Code & Daytime Telep	bhone Number		
Enclosed is a check	for the following amount m	ade payable to the Florida Departn	nent of State:		
■\$35 Filing Fee	\$43.75 Filing Fee & 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)		
Mailing Ad Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 127	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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	or	0. 1.50	س. ا
BOD Allen Com	olete Systems	Contracting,	NCI
(Name of Corporation as cu	rrently filed with the Florida De	pt. of State)	
j	P030000144D	0	
(Document N	umber of Corporation (if known)		
Pursuant to the provisions of section 607.16 amendment(s) to its Articles of Incorporation		a Profit Corporation adopts the fo	ollowing
A. If amending name, enter the new name	of the corporation:		
		The ne	
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or t name must contain the word "chartered," "p B. Enter new principal office address, if a	the designation "Corp," "Inc," or or the a	r "Co". A professional corporation	on
(Principal office address <u>MUST BE A STRI</u>			
C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF</u>)		DIVÍSION OF CONTOUR 9:	FILEU SIAI
D. If amending the registered agent and/o		orida, enter the name of the	
new registered agent and/or the new re	gistered office address:		3.
Name of New Registered Agent:			
New Registered Office Address:	(Florida street addre	ess)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if chan	ging Registered Agent:		
I hereby accept the appointment as registered	agent) am familiar with and a	ccept the obligations of the position	n.
_	Signature of New Registered Age	ent, 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)

<u>Title</u>	Name	Address	Type of Action
Pres.	Zef J. Noreca	1841 Moon Flower Cir Wellington, FL 33414	⊠ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	g or adding additional Articles, enter clional sheets, if necessary). (Be specific		
provisions	ndment provides for an exchange, reclation implementing the amendment if no applicable, indicate N/A)	ssification, or cancellation of issue t contained in the amendment it	ued shares, self:

The date of each amendmen	(s) adoption: 03/01/2011
Effective date if applicable:	(date of adoption is required) 03/01/2011
Enecuve date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
X The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	March 28, 2011
Signature _	Doloit Ollan President
	a director, president or other officer — if directors or officers have not been ected, by an incorporator — if in the hands of a receiver, trustee, or other court
	ointed fiduciary by that fiduciary)
	ROBERT ALLEN
	(Typed or printed name of person signing)
	PRES 10 PNT
	(Title of person signing)