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Amend Thewis 10-25-11

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF COR	PORATION:	Mark Porter Construction Inc
DOCUMENT NU	JMBER:	P03000027135
The enclosed Artic	cles of Amendment and fee	e are submitted for filing.
Please return all co	orrespondence concerning	this matter to the following:
		Mark Porter
		Name of Contact Person
	Mark Porter Construction Inc	
		Firm/ Company
		4244 Riverbeach Dr
		Address
	Po	ort Charlotte, FL 33953
		City/ State and Zip Code
	E-mail address: (to be a	onow@yahoo.com sed for future annual report notification)
For further information	ation concerning this matte	r, please call:
N	Mark Porter	at (941) 628-8579
	of Contact Person	Area Code & Daytime Telephone Number
	•	made payable to the Florida Department of State:
☑ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
P.O. Box 6	t Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED

of 11 OCT 24 AM 8: 37 Mark Porter Construction, inc.

(Name of Corporation as currently filed with the Florida Dept. of State ECRE TARY DE STATE ALLAHASSEE FLORIDA (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

breviation "Corp.," "Inc.," or Co.," or the me must contain the word "chartered," "prof		Co". A professional corporat
Enter new principal office address, if applerincipal office address MUST BE A STREET		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u></u>	
If amending the registered agent and/or renew registered agent and/or the new regis		a, enter the name of the
Name of New Registered Agent:		
Name of New Registered Agent: New Registered Office Address:	(Florida street address)	
	(Florida street address) (City)	, Florida (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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	Michael Porter	6161 Sunnybrook Blvd Englewood, FL 34224	☑ Add □ Remove
Sec	Leon Porter	690 Liberty Street Englewood, FL 34223	☑ Add □ Remove
	dditional sheets, if necessary).	(ac specyle)	
<u>provisi</u>		ange, reclassification, or cancellation of the amendm	

The date of each amendment	(s) adoption: October 13, 2011
Effective date if applicable:	(date of adoption is required)
Effective date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/web by the shareholders was/web	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)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
Dated	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
арро	ointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)