P03000074642

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(Requestor's Name)	_
(Address)	_
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(Address)	_
(City/State/Zip/Phone #)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	_
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(Document Number)	_
Certified Copies : Certificates of Status	
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Special Instructions to Filing Officer:	7
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 21, 2008

CLAUDIO RIOS CLAUDIO RIOS CONSTRUCTION INC 210 E ROSEHILL AVE DELAND, FL 32724

SUBJECT: CLAUDIO RIOS CONSTRUCTION INC

Ref. Number: P03000074642

We have received your document for CLAUDIO RIOS CONSTRUCTION INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please sign document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 608A00058135

SECRETARY OF STATE SECRIDA TALLORIDA

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BECEINED

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CLAUDIO RIOS CONSTRUCTION INC				
DOCUMENT NU	JMBER: <u>P0300007</u> 4	1642		
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.		
Please return all co	orrespondence concerning th	is matter to the following:		
		CLAUDIO RIOS		
	(Name	of Contact Person)		
		RIOS CONSTRUCTION INC		
. (1	(M	rm/ Company)	N. 1. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
		E ROSEHILL'AVE HELL		
स्मार्थेती हो। ते हेर उन्हालिक कुनुस्था कुनुस्थान	J. 30 (17) 12	(Address) (DIOT OF COLLARS (CT.)		
	DELA	ND FLORIDA 32724 State and Zip Code)		
For further inform	ation concerning this matter,			
CLAUDIO RIOS		at (<u>386</u>) <u>747-380</u> (Area Code & Daytim	03	
(Nam	e of Contact Person)	(Area Code & Daytim	ne Telephone Number)	
Enclosed is a chec	k for the following amount r	nade payable to the Florida De	epartment 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 A Amendmer Division of		Street Address Amendment Section Division of Corporations	S	
P.O. Box 6		Clifton Building 2661 Executive Center O	n e manufe grapmen van de herbitrighings een eggell maar	
i allaliasset	V, I L J&J LT	Tallahassee FI 32301	JII CIT	

Articles of Amendment to Articles of Incorporation of

FILED			
08 DEC -14	PH 2: 02		
ALESS MAY			

		JCTION INC	+
(Name of Corporation as cur	rently filed with t	he Florida Dept. of S	<u>tate</u>)
P0	3000074642		
	ımber of Corporati	on (if known)	
suant to the provisions of section 607.10 owing amendment(s) to its Articles of Inco		tes, this <i>Florida Prof</i>	it Corporation adopts
If amending name, enter the new name	of the corporation	<u>n:</u>	
		,	
new name must be distinguishable corporated" or the abbreviation "Corp., o". A professional corporation narociation," or the abbreviation "P.A."	" "Inc.," or Co.,	" or the designation	"Corp," "Inc," or
Enter new principal office address, if ap incipal office address <u>MUST BE A STRE</u>			
			-
Enter new mailing address, if applicabl (Mailing address MAY BE A POST OFF			
new registered agent and/or the new reg			nter the name of the
			nter the name of the
new registered agent and/or the new reg	gistered office add		nter the name of the
new registered agent and/or the new reg	gistered office add	lress:	nter the name of the
	gistered office add	lress:	— —

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	ISRAEL RIOS	210 E ROSEHILL AVE DELAND FL 32724	
		·	☐ Add ☐ Remove
	nding or adding additional Artic		
·			
	1		
<u>provis</u>		ange, reclassification, or cancellation of diment if not contained in the amendm	
	-		

The date of each amendment(s) ad	option: NOVEMBER 14, 2008	* ************************************	
Effective date if applicable:			
(no n	nore than 90 days after amendment file	e date)	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number ficient for approval.	of votes cast for the amendment(s)	
	roved by the shareholders through voticeach voting group entitled to vote sepa		
"The number of votes cast fo	or the amendment(s) was/were sufficient	nt for approval	
by		•	
(votin	g group)		
The amendment(s) was/were adoption was not required.	pted by the board of directors without	shareholder action and shareholder	
The amendment(s) was/were adoption was not required.	pted by the incorporators without share		
action was not required.		THIS IS THEWAY hasigns his NAM	1
Dated_NOVEMBER		hesigns his NAM	1 E !
Signature <u>(/ a</u>)	udio Rios	Thank you, if you have ectors or officers have not been of he R	ľ
selected, t	ctor, president or other officer – if dire by an incorporator – if in the hands of fiduciary by that fiduciary)	a receiver, trustee, or other court question	A) S
		Pleaseca	
	CLAUDIO RIOS	AT40793	13-8571
	(Typed or printed name of pers	on signing)	
· . • • · · • · · · · · · · · · · · · ·	PRESIDENT	·	
	(Title of person signing)		