P03000120025

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





500439042545

11/04/24--01017--025 **85.00

2021-1107 - 1 MH 9: 46

Comenda

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Carl Corley Consti	ruction, Inc.		
	BER: P03000120025			
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Sylvia A CorleyS			
		Name of Contact Person	1	-
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company		_
	4100 Navajo Lane			
		Address		
	TITUSVILLE			_
		City/ State and Zip Code	2	
	SYLVIACORLEY@YAHO			
	E-mail address: (to be us	sed for future annual report	notification)	~ 3
For further information	on concerning this matter, pleas	se call:		2024 N.JV -4
Sylvia A Corley		at (_321	267-4964	1 -
Name	of Contact Person	Area Cou	de & Daytime Telephone Numb	per pe
Enclosed is a check f	or the following amount made	payable to the Florida Depa	irtment of State:	9:46
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	. () - 카
An Div P.C	illing Address nendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee 4. Monroe Street, Suite 810 ssee, FL 32303	

Articles of Amendment to Articles of Incorporation of

(<u>Name</u>	of Corporation as currently	filed with the Florida Dept, of State)	
203000120025				
	(Document Number of	Corporation (if known)		
ursuant to the provisions of section 607 s Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation adopts the f	ollowing	amendment(
. If amending name, enter the new n	ame of the corporation:			
		9 6 10 10 1		The new
ime must be distinguishable and contain lnc.," or Co.," or the designation "C chartered," "professional association,"	$Corp_i$ " "Inc." or "Co". A	ompany, or incorporated or inc dol professional corporation name must	revianon Contain	the word
Enter new principal office address,	if applicable:	N/A		
rincipal office address MUST BE A S			<u>-</u>	
				
Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A		
			. 2	
			2021	<u> </u>
If amending the registered agent ar new registered agent and/or the ne				
	N/A		·	- <u>-</u> -
Name of New Registered Agent	10/1		· · · · · · · · · · · · · · · · · · ·	
			ب ``	p ***/
	(Florida stre	et address)	, :	5
New Registered Office Address:	N/A	ret address), Florida_	(Zip Co	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

* 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)

Example:

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Salty Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	<u>v</u>	_	Clint Corley	4100 Navajo Lane
X Add				Titusville, FL 32796
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				 ·
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding addition (Attach additional sheets, if neces	sary). (Be specific)			
N/A				
	-	· .		
		· <u>-</u>		
			<u> </u>	
_				
	<u> </u>			
·				
· · ·				
· · · · · · · · · · · · · · · · · · ·				
. If an amendment provides for a	in exchange, reclassific:	ition, or cancellation of	issued shares,	
provisions for implementing th	ne amendment if not co	ntained in the amendm	ent itself:	
(if not applicable, indicate l	VZ4)			
N/A				
	····			
				<u> </u>
· · · · · · · · · · · · · · · · · · ·				
- ·			_	
		·		

. .

The date of each amendment(s) adoption: 10/29/2024 , if c	other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareh action was not required.	older
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)	
Dated 10/29/24	
Dated 10/27/24	
Signature	
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)	
Sylvia Corley	
(Typed or printed name of person signing)	
Secretary	

(Title of person signing)