P03000 | 40030

(Re	equestor's Name)			
(Ac	ldress)			
· . (Ac	ldress)			
(Ci	ty/State/Zip/Phone	e #)		
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUN 15 AM 11:55

Amend

JUN 21 2016 I ALBRITTON

COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: DAR CONTRACTORS, INDOCUMENT NUMBER: P0300014 6630
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Trease return an correspondence concerning this matter to the following.
RAYMOND JOHNSON. Name of Contact Person
DOR CONTRACTORS, THO
9430 ORME ROAD
JACKSONVILLE, FL 32220 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
RATIMOND JOHNSON at (904) 838-1664 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status \$35 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) \$35 Filing Fee & Certificate of Status (Additional Copy is enclosed)
Mailing Address Street Address

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Ar	rticles of Amendment	t	20/5	~//
Apr	to ticles of Incorporation	n	> S. 1/1/k	, <u>`</u>
DERCONT	OCTOR	5, NC.		15 11/1
(Name of Corporation a	as currently filed wit	h the Florida Dept. of	State)	
	Number of Corporati			10/8/28 10/4
Pursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	atutes, this <i>Florida Pr</i>	ofit Corporation adopt	s the following amo	endment(s)
A. If amending name, enter the new name of the corpo	oration:			
NIA.			The	new
name must be distinguishable and contain the word " "Corp.," "Inc.," or Co.," or the designation "Corp," " word "chartered," "professional association," or the abb	"Inc," or "Co". A pr	eany," or "incorporate rofessional corporation	ed" or the abbrev	iation
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>	MA.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		17 A.		
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		rida, enter the name o	of the	
Name of New Registered Agent	Mla.			
Have of New Yest Regular Carligent	1 1 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			
	(Florida street address)			
New Registered Office Address:	(City)	, Flo	orida	
New Registered Office Address: New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	ered Agent:	, Floor		
	MIA.	Igout if changing		
Cionatus	ra of Nau Pagistavad	lagut 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.

Example: X Change	<u>PT</u>	John Doe				
X Remove	<u>V</u>	Mike Jon	e <u>s</u>			
X Add	<u>sv</u>	Sally Smi	<u>th</u>			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		Address	
1) Change	Secre	tary.	JONATHAN D SCHAEFFER	- •	9430 ORME JACKSONVILLE,	Rond FC 3222
Remove						-
2) Change		 -		_		-
Add						-
3) Change				_		-
Remove						-
4) Change				_		-
Add						
5) Change				-		-
Add						-
6) Change						-
6) Change	~			-		- -
Remove						

E. <u>If amending or a</u> (Attach <i>additiona</i>	adding additional Articles, enter change(s) here: I sheets, if necessary). (Be specific)
	None
	ı
	
If an amendment	provides for an exchange, reclassification, or cancellation of issued shares, mplementing the amendment if not contained in the amendment itself:
(if not appli	mand Johnson - President 90%
-Jo	hather Schaeffer- Secretory - 10%.
(R	symond Johnson who Currently own
10	ool is giving 10% of the Sharen
	Johattal Schaeffer who will
	w Own (0°).

The date of each amendment(s) adoption: 6-13-2016 date this document was signed.	, if other than the
Effective date if applicable: 6-13-2016 (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 document's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature + April Address (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)	
(Typed or printed name of person signing) PRESIDENT. (Title of person signing)	