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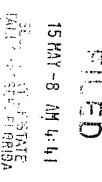
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COVER LETTER

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TO: Amendment Section Division of Corporations		5 1 1 1		
NAME OF CORPOR	ATION: W.M. CLEARY C	ONSTRUCTION, INC.		
DOCUMENT NUMB				
	of Amendment and fee are su			
	pondence concerning this ma	_		
	-			
-	WILLIAM M CLEARY			
		Name of Contact Persor	1	
<u>-</u>	W.M. CLEARY CONSTRU	·		
		Firm/ Company		
: -	20395 LAKE LINDSEY RD			
	BROOKSVILLE, FL 34601	Address		
-		City/ State and Zip Code		
umele	eary l@hotmail.com			
WINCE	· ·	sed for future annual report	notification)	_
	is man address. (to be as	Tot ratare annual report	notification,	
For further information	concerning this matter, pleas	se call;		
WILLIAM M CLEARY		at (352	279-6218	
Name of Contact Person			de & Daytime Telephone N	umber
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

W.M. CLEARY CONSTRUCTION, INC.		Take and	Ī	131
(Name of Corporation as currently filed	with the Florida Dept. of State	77.01	<u></u>	-
P03000157112				
(Document Number of Corp	oration (if known)	***		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florid</i> its Articles of Incorporation:	ia Profit Corporation adopts the foll	owing an	nendme	ent(s) te
A. If amending name, enter the new name of the corporation:				
		The	e ner	v
name must be distinguishable and contain the word "corporation," " "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", word "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name n			
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)				
-				
_				
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
_				
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the			
Name of New Registered Agent				
(Florida street add	dress)			
New Registered Office Address:	, Florida			
(City)	, i ionua	(Zip Code	·)	
Now But a late of the same and				
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with a	nd accept the obligations of the posit	tion.		
	The second secon			
0'				
Signature of New Registe	rea 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)

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 Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>v</u>	MICHAEL SWISHER	20395 LAKE LINDSEY RD
Add			BROOKSVILLE, FL 34601
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	·		
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Stument IT not contained in the amendment risen.

	MAY 1, 2015	
The date of each amendment	(0) 420 11 12 13 14 15 15 15 15 15 15 15	, if other than the
date this document was signed	MAY 1, 2015	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will r he Department of State's records.	iot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	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 led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
• •	(voting group)	
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
MAY	Y 1, 2015	
Dated		
Ci a una de como	Willia M. Clean	
S	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)	_
	WILLIAM M CLEARY	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	