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2018 NOV -8 PM 3: 41

C. COLDEN

COVER LETTER

TO: Amendment Section

Division of Corporations

AME OF CORPORATION: TUVILLY CONSTRUCTION, Inc.			
DOCUMENT NUMBER:			
e enclosed Articles of Amendment and fee are submitted for filing.			
ease return all correspondence concerning this matter to the following:			
Name of Contact Person Turley (onstruction Inc. Firm/ Company 1931 SW 7th Ave Address Cala, Fl 3447/ City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)			
or further information concerning this matter, please call:			
Kelly DEITRICK at 352 624-9180 Name of Contact Person Area Code & Daytime Telephone Number			
nclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)			
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations			

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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Articles of Ame	endment 20
to	Up. In
Articles of Incor	poration
Turley Con	struction Inc.
(Name of Corporation as currently f	iled with the Florida Dept. of State)
P640000	8677
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation: A. If amending name, enter the new name of the corporation:	orida Profit Corporation adopts the following amendment(s) to The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	<u></u>
(Principal office address MUST BE A STREET ADDRESS)	
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 Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	SV Sally	y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	Jessica Turley	474 SW 63rd STR. Ocala, FL 3447,
Add Remove			<u>OCAIA, FL 344 1,</u>
2) Change			
Add			
3) Change			
Remove			
4) Change			
Add			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

f amending or adding ac Attach <i>additional sheets, i</i>						
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lf an amendment provid	es for an exchange, re	eclassification, or cand	ellation of iss	ued share	es,	
provisions for implement	nting the amendment	if not contained in the	<u>amendment</u>	itself:		
(if not applicable, in	dicate N/A)			- 0.01		, ,
Paga andina	PSSICG	Tuney	$a \leq a$	3/)%	Shared	1010
KELLOVING	000014	-, , , , , , , , , , , , , , , , , , , 	() _ 5	, <u>, , , , , , , , , , , , , , , , , , </u>	17.102	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: $10-29-18$	
Effective date if applicable: 10-29-18 (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 document's effective date on the Department of State's records.	will 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	
bv	
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.	
Dated	
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)	
Teff E Turley (Typed or printed name of person signing)	
President	
(Title of person signing)	
(Title of person signing)	

. . . .