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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: W L Harper Construction Inc.
OOCUMENT NUMBER: <u>P04000974</u> 22
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
William L. Harper Name of Contact Person W. L. Harper Company Firm/ Company H939 104 h Terrace Address Live Oak FL 32060 City/ State and Zip Code Wharper 1948 @ windstram. not
E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call:
Wendy Grennell at (386) 984-9970 Name of Contact Person Area Code & Daytime Telephone Number
Traine of Contact (Closis
inclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

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Articles of Incorporation

of

W L Harper Construct	y filed with the Florida	20 JAN 30 PM 2: 50 Dept. of State)
P04000097422	•	
(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporatio	on adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:		
NA		The new
name must be distinguishable and contain the word "corporation," "C" "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	Eprofessional corporation	ted" or the abbreviation "Corp.," on name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA_	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:		name of the
Name of New Registered Agent		
(Florida stre	ret address)	
New Registered Office Address:	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		ttions of the position.
Signature of New Re	egistered Agent, if changi	ing

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c). 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)

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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		Enver Sakiri	10135 Barch Blud
X Add			Jacksonville FL
Remove			32246
2) Change	5	Wendy Grennell	3104 SWOLD WICER
Add		•	Fort While FL 32032
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			·
Add			
Remove			

Attach <i>udditional sheets, if nece</i>	sawy), (De specific)			
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		4.		
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<u>,</u>	<u></u>			
		<u>,</u>		_
				
If an amendment provides for	an exchange, reclassificatio	n, or cancellation of issue	d shares,	
provisions for implementing t (if not applicable, indicate i	he amendment if not contai V/4)	ned in the amendment its	<u>elf:</u>	
· · · · · · · · · · · · · · · · · · ·		•		
20 Shares to	<u>Enver Jakir</u>	7		
O otheres to	Wandy Area	120011		
O GIVES 10	werky Ore	neil		
	 			
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The date of each amendment(s) adoption:	, if other than t
date this document was signed.	
Effective date <u>if applicable</u> :	
	o more than 90 days after amendment file date)
Note: If the date inserted in this block does not a document's effective date on the Department of States	neet the applicable statutory filing requirements, this date will not be listed as te's records.
Adoption of Amendment(s) (CHEC	K ONE)
The amendment(s) was/were adopted by the incaction was not required.	orporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	reholders. The number of votes cast for the amendment(s) oval.
	areholders through voting groups. The following statement up entitled to vote separately on the amendment(s):
"The number of votes cast for the amenda	ent(s) was/were sufficient for approval
by	
by(voting	угоир)
Dated/-26-2026	
Signature Que Oliam	Harper tor other officer - if directors or officers have not been
(By a director, presider selected, by an income	t or other officer – if directors or officers have not been rator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by	
iwi	d or printed name of person signing)
(Ту	ed or printed name of person signing)
	resident
(Tit	e of person signing)