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PICK-UP	☐ WAIT	MAIL
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Special Instructions to I	Filing Officer:	
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SEO 30 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: FLORIDA VENT	URE HOLDINGS, INC	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	utter to the following:	
	Iryna C Nakonecznyj		
		Name of Contact Person	n
		Firm/ Company	
	356 TIVOLI CIRCLE		
	DAVENPORT, FL 33837	Address	
		City/ State and Zip Cod	е
	office@flconstruction.us		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Iryna C Nakonecznyj		at (_) 232-9240
Name o	of Contact Person		de & Daytime Telephone Number
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	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassec, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to Articles of Incor	poration	
Name of Corporation as currently f	30000	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:		idment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	The npany," or "incorporated" or the abbreviation "Corrofessional corporation name must contain the w	۳n ′'
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2021 5	
C. Enter new mailing address, if applicable:	2)	
(Mailing address MAY BE A POST OFFICE BOX)		nteri)
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent	in Florida, enter the name of the	_
(Florida street d	ndtrace)	
New Registered Office Address:	, Florida	
(Cit.	y) (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

Check if applicable

☐ 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 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.

<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
i) Change	inc	Roman Nakonecznyj	356 TIVOLI CIRCLE
Add			DAVENPORT, FL 33837
X Remove			·••
2) Change	VP	Stephan M Nakonecznyj	10 EAST MAGNOLIA STREET
XAdd			DAVENPORT, FL 33837
Remove 3) X Change	Presider	ı Iryna C Nakonecznyj	356 TIVOLI CIRCLE
Add			DAVENPORT, FL 33837
Remove			197 Janes
4) Change		-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)			
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09/15/2021	
The date of each amendment(s) adoption:	, if other than the
ate this document was signed.	
09/15/2021	
ffective 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 ocument's effective date on the Department of State's records.	date will not be listed as th
doption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	ction and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nt(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state 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	ement
by Iryna C Nakonecznyj "	
(voting group)	
09/15/2021 Dated	
Signature X (By a director, president or other officer = if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	n ourt
Iryna C Nakonecznyj	
(Typed or printed name of person signing)	
President	
(Title of person signing)	·····