## P04000154213

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Brian Hayes Reside	ential Contracting Inc				
DOCUMENT NUM	IBER: P04000154213					
	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	Brian Hayes					
	Name of Contact Person					
	Brian Hayes Residential Contracting Inc					
Firm/ Company						
2128 Little John Rd						
Address						
Melboure Fla 32935						
City/ State and Zip Code						
				TALLARDISSEE,		
	hayes@hayesrci.com  E-mail address: (to be us		ent not incoming	16.1		
	E-mail address: (to be us	sed for future annual repo	ort nottrication)			
For further informati	on concerning this matter, pleas	se call:				
RIAN HAYES		321	302 4267	דון		
Name of Contact Person		Area (	Code & Daytime Telephone Number			
Enclosed is a check t	or the following amount made	payable to the Florida De	partment 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ame Divis The 2415	et Address Indiment Section Sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 Ishassee, FL 32303			

## Articles of Amendment to Articles of Incorporation of

( <u>Name</u>	of Corporation as curre	itly filed with the Flori	da Dept. of State)		
Brian Hayes Residentiaol Contracting In	c				
	(Document Number	of Corporation (if know	/n)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corpor	ation adopts the following	ng ameno	dment(s) to
A. If amending name, enter the new n	ame of the corporation:				
na				The i	new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cateriared," "professional association,"	Corp," "Inc," or "Co".	A professional corpor		ion "Corp	
B. Enter new principal office address,	if applicable:	NA		SE	20
(Principal office address MUST BE A S				<b>₹</b>	- 23 A
					- 72 - 73
			<u></u> -	五点	_ <b>キ</b> -
C. Enter new mailing address, if appl		NA		落帛	PH
(Mailing address MAY BE A POST	OFFICE BOX)			<u> </u>	<del></del>
				<u> </u>	_ 55
				,	_
D. If amending the registered agent ar	rd/or registered office as	ldress in Florida, antar	the name of the		
new registered agent and/or the ne			THE HAME OF THE		
Name of New Registered Agent	BRIAN HAYES				
		•		_	
	(Florida	street address)		_	
New Registered Office Address:	2128 LITTLE JOHN RD MELBOURE		32935 , Florida		
New Registered Office Address.		(City)		Code)	_
Non-Designation of America Circumstance of a	handing Double and Ann				
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ligations of the position.		
	,				
NZ.	Was Now	10.5			
	Signature of New	Registered Agent, if cha	unging	_	
	/				

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 = Trustec; 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.

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	VP	RONALD R HANCOCK	2 WEST POINT DR
Add			COCOA BEACH FL 32931
X Remove			ECH TAL
2) Change			LAH.
Add			SS (3)
Remove 3) Change			
Add			<u> </u>
Remove			
4) Change		<u> </u>	
Add			
Remove			1
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

The date of each amendment(s) adoption:	, if other	than th	ne
date this document was signed.			
Effective 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 date we document's effective date on the Department of State's records.	ill not be list	ed as th	ne
Adoption of Amendment(s) (CHECK ONE)			
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action are action was not required.	d shareholde	r.	
☐ 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 BRIAN S HAYES RONALD R HANCOCK (voting group)  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)  BRIAN HAYES  (Typed or printed name of person signing)	SECRETARY OF STATE TALLAHASSEE, FL	2023 APR -4 PM 1:55	
PRESIDENT			
(Title of person signing)	•	-	

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