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COVER LETTER

TO: Amendment Section

Division of Corporations				
Davidson H	Builders Corp.			
DOCUMENT NUMBER: TOUCH	<u> </u>			
The enclosed Articles of Amendment and fee are sub	omitted for filing.			
Please return all correspondence concerning this matt	ter to the following:			
Jose L	Name of Contact Person	_		
	_			
Sun	aj Bulders Corp.	_		
4825 Belvede				
	Address	_		
Haverh:	City/ State and Zip Code	_		
	City/ State and Zip Code			
lopezacion	nt @ hotmail.com			
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please	e call:			
Paola J. Lopez	at (56) 385-669	٩		
Name of Contact Person	Area Code & Daytime Telephone Number	er		
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) ☐\$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment

to

Articles of Incorporation

~	O1
Sumai Buil Mass	Caronrotino
- Jumai Juliaeis	(DAPUTATION)
Sumaj Builders (Name of Corporation as currently filed with the	he Florida Dept. of State)
Daymonguain	

ent(s) to

(Document Number of Corporation (if Kn	own)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation ado	pts the following a	amendme
A. If smending name, enter the new name of the corporation:	1/4	2	The new
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		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA		SECRETARY OF
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	PH IS: II
New Registered Office Address: New Registered Office Address: (Florida street of the control o	address), Florida	(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 o	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 = Charman 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>Joh</u>	uı Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add ·	<u>ŞV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	S	Guilem Lopez	4825 Belvedere Rd
Add		·	Haverhill, FL 33415
Remove			
2) Change Add	P	Joseluis Lapez	4825 Belvedere Rd. Haverhill, FL
Remove			33415
3) Change		***************************************	
Add			
Remove			
4) Change			
Add			·
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add .			
Remove			

Attach addition	r adding additional nal sheets, if necessa	rail (Re charific)	mpels mete.		
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f ad ameddm	ent provides for an	exchange, reclassi	lication, or cancella	ition of issued sha	res,
provisions lo	r implementing the	amendment if not	contained in the an	uendment itsell:	
(if not ap	plicable, indicate N/2	⁴⁾] ^	,		
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The date of each amendment(s) adoption: May 15 -, 2013 date this document was signed.	if other than the
Effective date if applicable: B1413	
(no more than 90 days after amendment file date)	
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	
by" (voting group)	
(voting group)	
☐ 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 89 2013	
Signature	
(By a director, president or other officer — interestors or officers have not been selected, by an incorporator — if in the bands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
lilem copez	***************************************
(Typed or printed name of person signing)	
Secretary	
(Title of person signing)	-