P04000155855

| (Re | questor's Name) | |
|-------------------------|-------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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06/20/12--01009--013 **35.00

12 JUN OF CORPORATION

Amend

JUN 2 1 2012 T. BROWN

COVER LETTER

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| TO: Amendment Section Division of Corporations | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--|--|--|
| NAME OF CORPORATION: Fagle Building Maintenance Services, In | 10 | | | |
| DOCUMENT NUMBER:PQ4000155855 | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| Marie Black | | | | |
| Name of Contact Person | _ | | | |
| Eagle Builling Maintenance Services, Inc. | | | | |
| | | | | |
| 8200 Coral Way Suite 100 | | | | |
| Address' | | | | |
| Miami, FL 33155 City/State and Zip Code | | | | |
| City/ State and Zip Code | _ | | | |
| eaglebras @ bellsouth. net | | | | |
| E-mail address: (to be used for future annual report notification) | | | | |
| For further information concerning this matter, please call: | | | | |
| Marie Black 305, 552-5938 | | | | |
| | | | | |
| Name of Contact Person Area Code & Daytime Telephone Num | ber | | | |
| Enclosed 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) Certified Copy (Additional Copy is enclosed) | | | | |
| Mailing Address Street Address | | | | |
| Amendment Section Amendment Section | | | | |
| Division of Corporations Division of Corporations | | | | |
| P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle | | | | |
| Tallahassee, FL 32314 2661 Executive Center Circle | | | | |

Tallahassee, FL 32301

12 JUN 20 PM 12: 32

Articles of Amendment to Articles of Incorporation of

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------|-------------------------------------------------|-----------------------------|
| tagle building the | intenance | Services | Inc. | _ |
| Eagle Bullding Ma (Name of Corporation as curre | ntly filed with the Flo | rida Dept. of Stat | <u>e</u>) | _ |
| P04000155855 | | | | |
| (Document Num | ber of Corporation (if l | cnown) | | _ |
| Pursuant to the provisions of section 607.1006, lits Articles of Incorporation: | Florida Statutes, this <i>Fl</i> | lorida Profit Corpe | oration adopts the followi | ng amendment(s) to |
| A. If amending name, enter the new name of | the corporation: | | | |
| | | | | _The new |
| name must be distinguishable and contain th "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association," B. Enter new principal office address, if apple | "Corp," "Inc," or "Cor or the abbreviation "P. | o". A professiona | "incorporated" or the delicorporation name must | abbreviation contain the |
| (Principal office address MUST BE A STREE) | TADDRESS) | | | |
| | | | | _ |
| | | | | _ |
| C. Enter new mailing address, if applicable: | | | | |
| (Mailing address <u>MAY BE A POST OFFIC</u> | CE BOX) | | - · · · · · · · · · · · · · · · · · · · | _ |
| | | | | _ |
| | | | | _ |
| D. If amending the registered agent and/or re | egistered office addre | ss in Florida, ente | r the name of the | - |
| new registered agent and/or the new regis | tered office address: | | | |
| Name of New Registered Agent | | | | |
| | | | | |
| | (Florida stree | t address) | | |
| New Registered Office Address: | | | , Florida | _ |
| | (City) | | (Zip Code) | |
| | | | | |
| New Registered Agent's Signature, if changing | g Registered Agent: | | | |
| I hereby accept the appointment as registered a | | th and accept the c | obligations of the position | |
| | | | | |
| Signature | e of New Registered Ag | ent, 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 | PT Johr | n <u>Doe</u> | |
|----------------------------|-----------------------|------------------|------------------------------------------------|
| X Remove | <u>V</u> <u>Mik</u> | e Jones | |
| X Add | <u>SV</u> <u>Sall</u> | y Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) X Change Add Remove | PT | Marie Black | 8200 Coral Way Suite 100 Mismi, FL 33155 |
| 2) Change Add Remove | <u> V5 D</u> | Michael L. Black | 15576 SW 103 St Mismi, FL 33191 |
| 3) Change Add Remove | | | |
| 4) Change Add Remove | | | |
| 5) Change Add Remove | <u></u> | | |
| 6) Change Add Remove | | | |

| attach additional sheets, if necessary). | (Be specific) |
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| f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
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| The date of each amendment(s) adoption: 6-13-12 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Effective date if applicable: 6-14-12 |
| Effective date if applicable: 6-19-12 (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) |
| 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 6-14-12 Signature Marie Blan |
| (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) |
| Marie Black (Typed or printed name of person signing) |
| Α |
| President |
| (Title of person signing) |