P05000003330

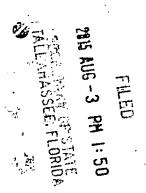
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A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	ORPORATION: HARTKOPF CO	INSTRUCTION COMPANY, INC				
	NUMBER: P05000003330					
	rticles of Amendment and fee are	submitted for filing.				
Please return al	I correspondence concerning this n	natter to the following:				
	ALBERTO MENDEZ					
	Name of Contact Person					
	HARTKOPF CONSTRUCTION COMPANY, INC					
		Firm/ Company				
	801 BRICKELL AVENUE	SUITE 937				
		Address				
	MIAMI, FL 33131					
		City/ State and Zip Code				
For further info	ormation concerning this matter, ple	used for future annual report notification) ease call:				
ALBERTO MI	ENDEZ	at (305) 924-2927				
	Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a c	heck for the following amount mad	e payable to the Florida Department of State:				
■ \$35 Filing	Fee □\$43.75 Filing Fee & Certificate of Status					
	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 of

FILED

HARTKOPF CONSTRUCTION COMPANY, INC	7815 AUG - 3 PM 1: 50
(Name of Corporation	as currently filed with the Florida Dept. of State)
P05000003330	SECRETARY OF STATE TAI DAHASSEE FLORIDA
(Documen	it Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
N/A	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	N/A ESS)
(1 mepm office min ess <u>needs about the same same</u>	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent N/A	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist- I hereby accept the appointment as registered agent. I a	ered Agent: um familiar with and accept the obligations of the position.
Signatu	ure 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 = 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	DV	JOSE A. MENDEZ	801 BRICKELL AVE. SUITE 937
Add			MIAMI, FL 33131
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If ai</u> (Atta	nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)
N/A	
F. If a	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pre	ovisions for implementing the amendment if not contained in the amendment itself:
N/A	(if not applicable, indicate N/A)
	W. T.
	·

The date of each amendment(s) ac	loption:	_, if other than th
late this document was signed.	. '	
07/3 Effective date <u>if applicable:</u>	1/2015	
incent date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shaleholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.	•
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
07/31/2015 Dated		
	Electo F. Mendey 17.	
(By a d	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	_
	ALBERTO MENDEZ	
••	(Typed or printed name of person signing)	
•	PRESIDENT	
	(Title of person signing)	