P05000036343

| (Requestor's Name) | |
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| (Address) | _ |
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| (Address) | |
| (Addless) | |
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| (City/State/Zip/Phone #) | |
| | |
| PICK-UP WAIT MAIL | |
| | |
| (Business Entity Name) | _ |
| (2.5, | |
| | _ |
| (Document Number) | |
| | |
| Certified Copies Certificates of Status | |
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| | _ |
| Special Instructions to Filing Officer: | |
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07/05/22--01026--022 **88.00



Hi

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | RATION: N CAMPOS CON | STRUCTION CORP | |
|--------------------------|---|--|--|
| DOCUMENT NUMI | BER: | | |
| The enclosed Articles | of Amendment and fee are st | ibmitted for filing. | |
| Please return all corres | spondence concerning this ma | atter to the following: | |
| | NIVALDO CAMPOS | | |
| | | Name of Contact Person | 1 |
| | N CAMPOS CONSTRUCTI | ON CORP | |
| | · <u> </u> | Firm/ Company | - |
| | 3401 NW 99 ST | , | |
| | MIAMI, FL 33147 | Address | |
| | | | |
| | | City/ State and Zip Code | e |
| | NCAMPOSCONSTRUCTIO | N@GMAIL.COM | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| For further information | n concerning this matter, pleas | | 216-3870 |
| | of Contact Person | at (at (|) 216-3870 le & Daytime Telephone Number |
| rvaine o | a Comace reison | Area Coo | te & Daytime Telephone Number |
| Enclosed is a check for | the following amount made p | payable to the Florida Depa | rtment of State: |
| S35 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 tion of Corporations Box 6327 hassee, FL 32314 | Amend Division The Co 2415 N | Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303 |

Articles of Amendment to Articles of Incorporation of

| N | CA | COSEM | CONSTRUCTI | ON CORP |
|---|----|-------|------------|---------|
| | | | | |

| N CAMPOS CONSTRUCTION CORP | | | |
|---|-----------------------------|---|-----------|
| (Name of Corporation as cu P05000036343 | irrently filed with the Flo | orida Dept, of State) | |
| | mber of Corporation (if kn | | |
| Pursuant to the provisions of section 607,1006, Florida Statutes its Articles of Incorporation: | • | | ient(s) t |
| A. If amending name, enter the new name of the corporation | ion: | | |
| | | The ne | и, |
| name must be distinguishable and contain the word "corporatio" lnc.," or Co.," or the designation "Corp.," "Inc," or "Corporation" are the abbreviation of the abbreviation." | o". A professional corp | rporated" or the abbreviation "Corp., poration name must contain the wor | rd |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | | |
| | | ~ ~2 | |
| | | 1022 ALI | · |
| | | A: U | 1 i |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 85 5 T | |
| <u> </u> | | | |
| | - | | |
| | | | |
| D. If amending the registered agent and/or registered office | a addmare in Litarida, aut | or the name of the | |
| new registered agent and/or the new registered office ad | <u>ldress:</u> | er the name of the | |
| Name of New Registered Agent | | | |
| Name of New Registerea Agent | | | |
| (Et | ida street address) | | |
| trion | ua sireci adaress) | | |
| New Registered Office Address: | | , Florida | |
| | (City) | (Zip Code) | |
| | | | |
| New Registered Agent's Signature, if changing Registered A | Avent: | | |
| hereby accept the appointment as registered agent. I am fam | iliar with and accept the c | phligations of the position. | |
| | | | |
| | | | |
| Signatura of N | lew Registered Agent, if c | | |
| | с в педыстей адені, ў С | unging | |
| Check if applicable The approximately information filed approximately (67,022) | | | |
| ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 | (11) (c), 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)

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> | <u>John Doe</u> | |
|-------------------------------|-----------|-----------------|---|
| X Remove | <u>v</u> | | |
| | <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 | D | PEDRO L SANCHEZ | 4510 NW 198 ST |
| Add | | | MIAMI FL 33055 |
| X Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | _ | |
| Add | | | 2022 |
| Remove | | | All |
| 4) Change | | | 4885 -5 |
| Add | | | |
| Remove | | | 85 <u>-</u> |
| 5) Change | _ | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific) | |
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| an amendment provides for an exchange, reclassification, or cancellation of issued shares, | |
| orovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | |
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| The date of each amendment(s) ac | loption: | , if other than the |
|--|--|----------------------|
| 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 bl document's effective date on the De | ock does not meet the applicable statutory filing requirements, this date will partment of State's records. | not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were ado action was not required. | pted by the incorporators, or board of directors without shareholder action and | shareholder |
| ☐ The amendment(s) was/were ado by the shareholders was/were sur | pted by the shareholders. The number of votes east for the amendment(s) ficient for approval. | |
| must be separately provided for a | roved by the shareholders through voting groups. The following statement rach voting group entitled to vote separately on the amendment(s): For the amendment(s) was/were sufficient for approval | FILED |
| by | (voting group) | 5 5 |
| | The state of the s | P 177 |
| 06/14/2022 | | A III II |
| Dated | | •• |
| a. (1 & | 了 | £_ |
| Signature(By a dir | ector-partident 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 | |
| appointe | d fiduciary by that fiduciary) | |
| : | SIVALDO CAMPOS | |
| _ | (Typed or printed name of person signing) | |
| I | PRESIDENT | |
| - | (Title of person signing) | |