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SECRETARY OF STATE OIVISION OF CORPORATIONS

JUL 10 2015 C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	N: Construct-Rite Ma	sonry, Inc.	
DOCUMENT NUMBER:	205000062191		, .
The enclosed Articles of Am		bmitted for filing.	
Please return all corresponde	nce concerning this ma	tter to the following:	
Debor	ah Sawyer		
	 	Name of Contact Person	n
Const	ruct-Rite Masonry, Inc.		
1370	ox Five Prive	Firm/ Company	· · · · · · · · · · · · · · · · · · ·
		Address	
Apopl	ca, FL 32712		
		City/ State and Zip Code	
-brandiemsav	vywer@gmail.com	constructatemo	sonry Jamail tom
E	-mail address: (to be us	sed for future annual report	notification)
For further information concernation between Sawyer	erning this matter, pleas		884_1834
	. P	at (de & Daytime Telephone Number
Name of Con	act Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	llowing amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee □	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	t Section Corporations	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Construct-Rite Masonry, Inc.				15 JUL -6	DH 0. 10
(Name	of Corporation as curren	tly filed with the Flori	da Dept. of Stat	<u>- 13 30L - 8 </u>	- Fi) Z: 8
P05000062191					
	(Document Number	of Corporation (if know	vn)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1.1006, Florida Statutes, this	s Florida Profit Corpo	ration adopts the	following amend	iment(s) to
A. If amending name, enter the new n	ame of the corporation:				
N/A				The r	new
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t	nation "Corp," "Inc," or	"Co". A professional		or the abbreviat	tion
B. Enter new principal office address,	if annlicable:	N/A			
(Principal office address MUST BE A S					_
					_
					_
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A		···	
					_
					_
D. If amending the registered agent ar			the name of the		
new registered agent and/or the ne		<u>s:</u>			
Name of New Registered Agent	Deborah Sawyer				
	1370 Foxfire Road For	k fire Drive			
	(Florida st	reet address)			
New Registered Office Address:	Apopka		, Florida	32712	<u> </u>
		(City)		(Zip Code)	
No. D. Carlotte at St. Carlotte					
New Registered Agent's Signature, if c I hereby accept the appointment as regist	nanging Registered Agent tered agent. I am familiar	<u>ı:</u> with and accept the ob	ligations of the pe	osition.	
•		_			
	Herorat	1. Shanka			

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 = 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 <math>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	John Doe			
X Remove	<u>v</u> .	Mike Jones			
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	Name	<u>Addres</u> s		
1) Change	P	Brandie Smith	1370 Foxfire Road FOX Fire Dr.		
Add			Apopka, FL 32712		
x Remove					
2) Change	P	Deborah Sawyer	1370 Foxfire Road Fox Fire Dr		
x Add			Apopka, FL 32712		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add	-				
Remove					
6) Characa					
6) Change	-				
Add					

	(Attach additional	lding additional Arti sheets, if necessary).	(Be specific)	1-1-1			
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	/A	•					
(if not applicable, indicate N/A)							
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(if not applicable, indicate N/A)							
(if not applicable, indicate N/A)	If an amendment	provides for an exch	ange, reclassific	ation, or cancel	llation of issued	l shares,	
	provisions for in	nplementing the ame	ndment if not co	ntained in the s	imendment itse	<u>II:</u>	
		able, inalcale N/A)					
	1						
							
	• • •						•
						· · · · · ·	

The date of each amendment(s) ac	N/A loption:	, if other than the
date this document was signed.		-4 CT)
Effective date <u>if applicable</u> :	•	SECRETARY OF STATE OIVISION OF CORPORATIONS
	(no more than 90 days after amendment file a	latal
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requiren partment of State's records.	15 JUL -6 PM 2: 18 nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the fficient for approval.	amendment(s)
	roved by the shareholders through voting groups. The follo each voting group entitled to vote separately on the amend	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action ar	nd shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and sh	areholder
selected	rector, president or other office – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, ed fiduciary by that fiduciary)	
	Deborah Sawyer	
	(Typed or printed name of person signing)	<u> </u>
	President	
	(Title of person signing)	