P05000/08210

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Office Use Only

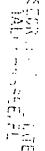


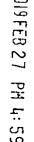
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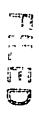
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COVER LETTER

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TO: Amendment Section
Division of Corporations

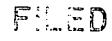
Tallahassee, FL 32314

NAME OF CORPO	RATION: FASCIA CONSTI	RUCTION INC.				
DOCUMENT NUM	P05000108210					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	DOUGLAS E. HOLT					
		Name of Contact Person	1			
	FASCIA CONSTRUCTION INC.					
		Firm/ Company				
	13820 SW 176 TERRACE					
		Address				
	MIAMI, FLORIDA 33177					
		City/ State and Zip Cod	e			
INF	O@FASCIACONSTRUCTIO	N.COM				
	E-mail address: (to be us	sed for future annual report	notification)			
For further informatio	n concerning this matter, pleas	se call:				
DOUGLAS E. HOLT	ſ	305	797-6237			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	or the following 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)	Certificate of Status Certified Copy (Additional Copy is enclosed)			
	iling Address		Address			
Amendment Section		Amendment Section Division of Corporations				
Division of Corporations P.O. Box 6327			Building			

2661 Executive Center Circle Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation of



FASCIA CONSTRUCTION INC.

2019 FEB 27 PH 4: 59

PASCIA CONSTRUCTION INC.			
(Name	of Corporation as currer	ntly filed with the Flori	da Dept. of State)
P05000108210	TALL THE SELECTION OF T		
	(Document Number	of Corporation (if know	vn)
Pursuant to the provisions of section 607.	1006, Florida Statutes, thi	is Florida Profit Corpor	ration adopts the following amendment(s
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co", A professional	
B. Enter new principal office address,		13820 SW 176 TE	RRACE
(Principal office address MUST BE A S		MIAMI, FLORIDA	A 33177
			· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if appl		13820 SW 176 TE	RRACE
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		MIAMI, FLORIDA	A 33177
 If amending the registered agent an new registered agent and/or the new 			the name of the
Name of New Registered Agent			
	13820 SW 176 TERRACE		
	(Florida :	street address)	
New Registered Office Address:		MIAMI	33177 Florida
	(City)		(Zip Code)
New Registered Office Address:	MIAMI		, Florida
New Registered Agent's Signature, if c	hanging Registered Age	nt:	
hereby accept the appointment as regist			ligations of the position.
			
	Signature of New	Registered Agent, if cha	unging

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 <u>PT</u> John Doe FILING CANCELLED <u>V</u> X Remove Mike Jones DUE TO RETURNED CHECK \underline{X} Add SVSally Smith Type of Action Title <u>Name</u> Address (Check One) 1) Change ____ Add ____ Remove 2) ____ Change __ Add ____ Remove 3) ____ Change ____ Add __ Remove 4) Change ____ Add __ Remove 5) ____ Change ___ Add __ Remove 6) ____ Change ____ Add ____ Remove

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Amending the address for the office of Fascia Construction Inc. The Corporation to 13820 SW 176 Terrace Miami, Florida
33177 all other information to remain the same.
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F. 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)

	10-01-2018	
The date of each amendment(s) add	ption:	, if other than the
date this document was signed.	2010	
10-01 Effective date <u>if applicable</u> :	-2018	
	(no more than 90 days after ame	ndment file date)
Note: If the date inserted in this bloodocument's effective date on the Dep		ling requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes icient for approval.	cast for the amendment(s)
	oved by the shareholders through voting group ach voting group entitled to vote separately o	
	or the amendment(s) was/were sufficient for a	pproval
by	(voting group)	"
	(voting group)	
The amendment(s) was/were adoption was not required.	ted by the board of directors without sharehol	lder action and shareholder
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder a	action and shareholder
10-08-2018		FILING CANCELLED
DatedSignature	Hall President	DUE TO RETURNED CHECK
· •	ector, president or other officer - if directors	
	by an incorporator – if in the hands of a receid fiduciary by that fiduciary)	iver, trustee, or other court
• •	• •	
1	Douglas E. HOlt	
-	(Typed or printed name of person si	igning)
1	President	
-	(Title of person signing	1