P05000164328

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SOPHIA CONSTRUCTION & DISTRIBUTOR CORP

DOCUMENT NUMBER: P05000164328

The enclosed ***Articles of Amendment*** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ESPANA, OSCAR
Name of Contact Person

SOPHIA CONSTRUCTION & DISTRIBUTOR CORP
Firm/Company

4839 Tudor Dr Apt 2
Address

CAPE CORAL, FL 33904
City/State and Zip Code

albertome1969@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

OSCAR ESPANA at (239) 203-5230
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

SOPHIA CONSTRUCTION & DISTRIBUTION INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P05000116413 28

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the designation "Corp," "Inc," or "Co." A professional corporation must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

Florida street address

New Registered Office Address: , Florida

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New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of that position.

Signature of New Registered Agent, if changing

Check if applicable

. The amendment(s) are being filed pursuant to s. 607.0120(11)(e), 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 [illegible]

P = President V = Vice President T = Treasurer S = Secretary D = Director [illegible] C = Chairman [illegible] Chief Executive Officer CFO = Chief Financial Officer [illegible] President, Treasurer, Director would be PTD

Changes should be noted in the following manner: Currently [illegible] Mike Jones [illegible] a change. Mike Jones leaves the corporation, Sally Smith [illegible] John Doe [illegible] Change, Mike Jones, V as Remove, and Sally Smith, SV as Add.

Example:

X Change	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change	Secretary	MONTANES, ALBERTO	[illegible] Peacock Creek South BLVD
___ Add			[illegible]
X Remove			CAPE CORAL FL 33909
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*) *See Attached*

08/22/2024

The date of each amendment(s) adoption: (other than the date this document was signed)

Effective date if applicable:

(no more than 90 days after date signed)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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)

08/22/2024
Dated

Signature

(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)

MONTANES, ALBERTO

(Typed or printed name of person signing)

SECRETARY

(Title of person signing)