P060000 50407

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: CQ CONSTRUCTION SERVICES INC DOCUMENT NUMBER: P06000050407 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CARLOS D QUINTERO Name of Contact Person CQ CONSTRUCTION SERVICES INC Firm/ Company 3731 SW 19TH PL Address CAPE CORAL, FL 33914 City/ State and Zip Code CQ.BUSINESS@HOTMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (239) 225-5110

Area Code & Daytime Telephone Number CARLOS D QUINTERO Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (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

CO	Construction	Services	Inc.

(Name of Corporation	on as currently filed with the l	lorida Dept. of State)	
P0600050407	•		
	nent Number of Corporation (if)	known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Co	prporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the co	orporation:		The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre	' or "Co". A professional co	corporated" or the abbreviate proration name must conta	ion "Corp" in the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD			
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			· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>		
			:
			, j
D. If amending the registered agent and/or register new registered agent and/or the new registered of the new		nter the name of the	,
Name of New Registered Agent			_
	(Florida street address)		_
	(i iii iii siree aan ees)	***	
New Registered Office Address:	(City)	, Florida(Zip	Code)
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent.		e obligations of the position.	
. The contract of the contract	,	3 , 1	
· ·	f N Paristant J. Laure	Cahanaina	
Signa	iture of New Registered Agent, i	i changing	
Check if annlicable			

☐ The amendment(s) is/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)

Example:

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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Franco, Victor Alexis	3231 SW 6th Pl
Add			Cape Coral, FL 33914
Remove 2) Change			
Add .			
Remove 3) Change			
Add			
Remove 4) Change			
Add			
Remove			
5) Change			
Aḍḍ Remove			
6) Change			
Add			
Remove			

	ticles, enter change(s) here: (Be specific)	
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	<u> </u>	-
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	nanve, reciassification, or cancellation of issi	ieu snares,
an amendment provides for an exc	endment if not contained in the amendment	itself:
provisions for implementing the am	endment if not contained in the amendment	itself:
an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	endment if not contained in the amendment	itself:
provisions for implementing the am	endment if not contained in the amendment	<u></u>
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an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	endment if not contained in the amendment	itself:
provisions for implementing the am	endment if not contained in the amendment	itself:
provisions for implementing the am	endment if not contained in the amendment	itself:

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	e(s) adoption:	, if other than the
date this document was signed		
Effective date if applicable:	10/09/2020	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, he Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sharehold	der action and shareholder
■ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amerere sufficient for approval.	dment(s)
	re approved by the shareholders through voting groups. The following ad for each voting group entitled to vote separately on the amendment(
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	······································	
,	(voting group)	
DatedSignature	y a director, president or other officer – if directors or officers have no	y baan
SC	elected, by an incorporator – it in the hands of a receiver, trustee, or oth oppointed fiduciary by that fiduciary)	
	CARLOS D QUINTERO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u> </u>