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COVER LETTER

TO: Amendment Section

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Division of Corporations NAME OF CORPORATION: CM CONSTRUCTORS, INC. DOCUMENT NUMBER: <u>P0600083467</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Constructors, Firm/ Company Groveland, Christing Lee JTMC e amail. Com E-mail address: (to be used for future annual report potification) For further information concerning this matter, please call: 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 Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Street Address

Amendment Section

Division of Corporations

The Centre of Tallahassee

Articles of Amendment

	Articles of Incorporation	2021 OCT -5 AH 9: 47
	of	2021.00-
CM Construc		-10C/-5 AM O.
_	f Corporation as currently filed with the F	orida Dept. of State) 3: 47
<u> </u>	083467	AMASSEC ESTATE
	(Document Number of Corporation (if ke	nown)
ursuant to the provisions of section 607.1 s Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profit Cor</i>	poration adopts the following amendment(s)
. If amending name, enter the new na	me of the corporation:	
		The new
tme must be distinguishable and contain lnc.," or Co.," or the designation "Co chartered," "professional association,"	the word "corporation," "company," or "inco orp," "Inc," or "Co". A professional cor or the abbreviation "P.A."	orporated or the abbreviation "Corp.," porotion name must contain the word
Enter new principal office address, i Principal office address <u>MUST BE A ST</u>		
Enter new mailing address, if applie (Mailing address <u>MAY BE A POST C</u>		
If amending the registered agent and new registered agent and/or the new	d/or registered office address in Florida, en registered office address:	ter the name of the
Name of New Registered Agent		
/ .	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
/		
ew Registered Agent's Signature, if ch	anging Registered Agent:	
ereby accept the appointment as registe	red agent. I am familiar with and accept the	obligations of the position.

Signature of New Registered Agent, if changing

Please note the o P = President: V	al sheets, if necessary fficer/director title b /= Vice President T	v the first letter of the o		?= Trustee: C = Chairma	n or Clerk; CEO = Chief
President, Treasu	r; CFO = Chief Finat urer, Director would	ncial Officer. If an office	er/director holds more	than one title, list the firs	n or Clerk; CEO = Chief t letter of each office held.
Changes should t	be noted in the follow	vina manua. C t			
a change, Mike J. Mike Jones, V as Example:	lones leaves the corp Remove, and Sally S	oration, Sally Smith is r mith, SV as an Add.	named the V and S. The	the PSI and Mike Jones . ese should be noted as Jo	is listed as the V. There is hn Doe, PT as a Change,
X Change	<u>PT</u> <u>Jo</u>	hn Doc			
X Remove	<u>V</u> <u>M</u>	ike Jones			
\underline{X} Add	<u>SV</u> <u>Sa</u>	lly Smith			
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s	
1) X Change	Preside	nt carys	Malever	301 Samp	ey Rd.
Add		J		Groveland	FL 34736
Remove					_
2) 💢 Change	Vi <u>ce Pr</u> es	ident Seabron	Scott Tyre		
Add					
Remove Change		Virginia	Carrican		
Add	_	J			
X Remove					
4) Change	Secretary	Christina	1 L Lee		
X Add	•				·····
Remove					
5) Change					
Add					
Remove					
6) Change					

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:

____ Add

____ Remove

If amending or adding add Attach <i>additional sheets, if</i>	necessary). (Be spec	cific)		
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f an amendment provides	for an exchange, recl	lassification or canc	ellation of issued char	ne
f an amendment provides provisions for implement	ng the amendment if	not contained in the	amendment itself:	
(if not applicable, indi	cate N/AY			
			<u> </u>	
		<u></u>		
/				

The date of each amendment(s) adoption: OCTODEY 1, 202
Effective date if applicable: OCTOBER 2021 (no more than 90 days after amendment file date)
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)
Dated 9/28/2021 ()
Signature (By a director, president or other officer – if directors of officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Cary J Malever (Typed or printed name of person signing)
President (Title of person signing)