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## **COVER LETTER**

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION:	NOVA	BUILDING O	CONTRACTOR INC.		
DOCUMENT NUMBER:	P06000	0088973	···		
The enclosed Articles of Amendme	nt and fee are su	bmitted for filing.			
Please return all correspondence concerning this matter to the following:					
<i>∓</i>	TZROY	Name of Contact Perso	n		
NOVA BUILDING CONTRACTOR INC. Firm/ Company					
52.48 NW 186 TH ST Address					
<i>M</i> J:	AMI F	L. 33055 City/ State and Zip Cod	e		
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
FITZROY SIMON		at ( 786	de & Daytime Telephone Number		
Name of Contact Per					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
	Filing Fee & cate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Secti Division of Corpo		Amend	Address Iment Section on of Corporations		

Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

Articles of	f Incorporation	Comments in the second Edition
ı	of	Since the Section of the
NOVA BUILDING	CONTRA	CTOP INC.
(Name of Corporation as curr	ently filed with th	,
P0600008897	13	SECRETARY OF STATE
(Document Numb	er of Corporation (	(if known) IALLAHASSEE, FLORIDA
arsuant to the provisions of section 607.1006, Florida Statutes, a Articles of Incorporation:	this <i>Florida Profit</i>	Corporation adopts the following amendmen
If amending name, enter the new name of the corporation	ı <u>:</u>	
NOVA BUILDING G	AROUP INC	The new
ame must be distinguishable and contain the word "corpor Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o ord "chartered," "professional association," or the abbreviati	ation," "company or "Co". A profe	y," or "incorporated" or the abbreviation
Enter new principal office address, if applicable:		A/M
Principal office address MUST BE A STREET ADDRESS )		
. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		N/A
. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add		, enter the name of the
new registered agent and/or the new registered office add	1635.	
Name of New Registered Agent	<del>// A</del>	
	•	
(Florid	la street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
The state of the s	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag	ent:	
hereby accept the appointment as registered agent. I am famil	iar with and accep	t the obligations of the position.
	,	
	ALU	
Signature of Ne	ew Registered Agei	nt, 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 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	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		<del>-</del>	
Add			
Remove		•	
2) Change			
Remove			
3 ) Change			
Remove			
4) Change			
Remove		•	
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending o</u> (Attach <i>additio</i>	nal sheets, if necessary). (Be specific)
If an amendm	ent provides for an exchange, reclassification, or cancellation of issued shares,
provisions fo	r implementing the amendment if not contained in the amendment itself: plicable, indicate N/A)
	<u> </u>
<del></del>	

The date of each amendment( date this document was signed.	s) adoption:		, if other than the
Effective date <u>if applicable</u> :	FEBRUARY 5	, 2016	
	(no more than 9	, <b>2016</b> 0 days after amendment file o	date)
Note: If the date inserted in the document's effective date on the			ments, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The sufficient for approval.	number of votes cast for the	amendment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders thro	ough voting groups. The followote separately on the amend	owing statement dment(s):
"The number of votes	east for the amendment(s) was/wer	e sufficient for approval	
by	(voting group)	***	
action was not required.	adopted by the board of directors adopted by the incorporators with		
sel	a director president or office eted, by an incorporator – if in the ointed fiduciary by that fiduciary)  FITZPOY M	shands of a receiver, trustee,	ave not been or other court
	(Typed or printed i	name of person signing)	
	PP-ESID-	ENT of person signing)	