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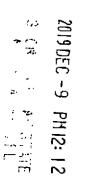
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Flor, da Co	just 10 Cousi Con-	Struction
DOCUMENT NUMBER: P06001241	450	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
	Name of Contact Person	
100.30	LUWS NO COUSS	CONS > ( V( 1 10 N
HOSNOUS	St	
405 N Duss	Address	<del>-</del>
New Smyr	a Black Fl 37 City/ State and Zip Code	2168
	City/ State and Zip Code	C
FL COUST 10	Cocs @ Cyroll Co	)M
E-mail address: (to be us	sed for future almual report	notification)
For further information concerning this matter, pleas	se call:	
Name of Contact Person	at (_38C	) 314 3835
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment** to

## Articles of Incorporation of

Florida Coast to Coast Construction, Inc.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P06000124004	

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P06000 124024		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the	following amendment(s
A. If amending name, enter the new name of the corporation:		The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name mu	bbreviation "Corp.," st contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	NA	
		2019 DE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	A//A.	. 9
		PH 12:
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		<u> </u>
Name of New Registered Agent	<u></u>	
(Florida str	rcet address)	
New Registered Office Address:	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		position.
$\Delta IA$	·	<u>.</u>

Signature of New Registered Agent, 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.

X Change	PT John D	<u> Ooe</u>	
X Remove	V Mike J	dones	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>	Jeremy Oranje	1718 Elizabeth St
Add			New Smirna Brack Fl
		0 110 0	35168
2) Change		Daniel BUFFOM	7020aknoobave
Add			New Smyran Beson FI
Remove Change		Couse Oranje	YOSN DUSS St
_X_ Add		•	New Smyrna Backy FI
Remove			32168
4) Change	<del></del>		
Add			
Remove			- Norwashian
5) Change			1-74/
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
E. If amending or additional she		ticles, enter change(s) here: (Be specific)	

<u> </u>	
	<del>-</del>
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)	
The state of the s	
Dogo 2 of 4	
Page 3 of 4	
The date of each amendment(s) adoption:, date this document was signed.	if other than th
Effective date if applicable:  (no more than 90 days after amendment file date)	<del></del>
100 mm c man zo auto amenana in me auto)	

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)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.
• •	by the shareholders through voting groups. The following statement oting 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)
The amendment(s) was/were adopted by action was not required.	y the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder
Dated	19
Signature /	- (1)
selected, by ar	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court iciary by that fiduciary)
	(Typed or printed name of person signing)
	President
(Title o	of person signing)