## PD6DDD131151

| (Req                      | uestor's Name)      |             |
|---------------------------|---------------------|-------------|
| (Add                      | lress)              |             |
| (Add                      | Iress)              | <del></del> |
| (City                     | //State/Zip/Phone # | 7)          |
| PICK-UP                   | WAIT                | MAIL        |
| (Bus                      | iness Entity Name   | )           |
| (Doc                      | cument Number)      |             |
| Certified Copies          | Certificates o      | f Status    |
| Special Instructions to F | Filing Officer:     |             |
|                           |                     |             |
|                           |                     |             |
|                           |                     |             |

Office Use Only



800321265778

12/05/18--01007--003 \*\*35,00

DIB DEC -5 AMII: 05

Amend

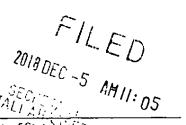
DEC 1 3 2018 I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO           | RATION: NEW BEACH CO   | NSTRUCTION PARTNER  | RS CO.  |
|-------------------------|--|---|---|
| DOCUMENT NUMI           |  |   |   |
| The enclosed Articles   | of Amendment and fee are su  | bmitted for filing.   |   |
| Please return all corre | spondence concerning this ma   | tter to the following:  |   |
|                         | ELISABETH D. KOZLOW  |   |   |
|                         | <del></del>  | Name of Contact Persor  | 1   |
|                         | SIEGFRIED, RIVERA, ET A  | AL.   |   |
|                         |  | Firm/ Company   |   |
|                         | 201 ALHAMBRA CIRCLE,   | 11TH FLOOR  |   |
|                         |  | Address   |   |
|                         | CORAL GABLES, FL 3313  | 4   |   |
|                         |  | City/ State and Zip Code  | 2   |
| FKO                     | ZLOW@SRHL-LAW.COM  |   |   |
|                         |  | sed for future annual report                                      | notification)   |
|                         | 15-mail address. (10 be ac   | ed for fatale aimaar report                                       |   |
| For further informatio  | n concerning this matter, pleas  | se call:  |   |
| ELISABETH D. KOZ        | <b>LOW</b>   | at ( 305  | de & Daytime Telephone Number   |
| Name                    | of Contact Person  | Area Co   | de & Daytime Telephone Number   |
| Enclosed is a check for | or the following amount made   | payable to the Florida Depa                                       | artment of State:   |
| ■ \$35 Filing Fee       | ☐S43.75 Filing Fee & Certificate of Status                                       | ☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)    |
| Am<br>Div<br>P.O        | iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314 | Amend<br>Divisio<br>Clifton<br>2661 E                             | Address Iment Section on of Corporations Building executive Center Circle assec, FL 32301 |

## Articles of Amendment to Articles of Incorporation of



NEW BEACH CONSTRUCTION PARTNERS CO.

| rporation (if known)  ida Profit Corporation adopts the following amendment(s)                      |
|---|
|   |
| ida Profit Corporation adopts the following amendment(s)  |
|   |
|   |
| The new   |
| "company," or "incorporated" or the abbreviation A professional corporation name must contain the " |
| 721 NE 4TH AVENUE   |
| MAMI, FLORIDA 33138   |
|   |
|   |
| 721 NE 4TH AVENUE   |
| 11AMI, FLORIDA 33138  |
|   |
|   |
| in Florida, enter the name of the   |
|   |
|   |
| ddress)   |
|   |
| , Florida   |
|   |

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                      | <u><b>P</b>T</u> | John Doc     |                 |
|-------------------------------|------------------|--------------|-----------------|
| X Remove                      | <u>v</u>         | Mike Jones   |                 |
| X Add                         | <u>sv</u>        | Sally Smith  |                 |
| Type of Action<br>(Check One) | <u>Title</u>     | <u>Name</u>  | <u>Addres</u> s |
| 1) Change                     |                  | <del>-</del> |                 |
| Add                           |                  |              | <del> </del>    |
| Remove                        |                  |              |                 |
| 2) Change                     |                  |              |                 |
| Add                           |                  |              |                 |
| Remove                        |                  |              |                 |
| 3 ) Change                    |                  |              |                 |
| Add                           |                  |              |                 |
| Remove                        |                  |              |                 |
| 4) Change                     | <del></del>      |              |                 |
| Add                           |                  |              |                 |
| Remove                        |                  |              |                 |
| 5) Change                     |                  |              |                 |
| Add                           |                  |              |                 |
| Remove                        |                  |              |                 |
| 6) Change                     |                  | _            |                 |
| Add                           |                  |              |                 |
| Remove                        |                  |              |                 |

| . If amending or adding additional Arti<br>(Attach additional sheets, if necessary). | (Be specific)   |                                       |
|--|---|---------------------------------------|
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   | · · · · · · · · · · · · · · · · · · · |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
| If an amendment provides for an excl   | nange, reclassification, or cancellation of issued shar | es,                                   |
| provisions for implementing the ame  | ndment if not contained in the amendment itself:        |                                       |
| (if not applicable, indicate N/A)  |   |                                       |
|  |   |                                       |
|  |   | <del></del>                           |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   |                                       |
|  |   | <del></del>                           |
|  |   |                                       |

| The date of each amendment(s)   | adoption:   | if other than the |
|---|---|-------------------|
| date this document was signed.  |   |                   |
| Effective date if applicable:   |   |                   |
|   | (no more than 90 days after amendment file date)  |                   |
| Note: If the date inserted in this bl<br>document's effective date on the Dep   | ook does not meet the applicable statutory filing requirements, this date will not partiment of State's records.                            | be listed as the  |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )  |                   |
| The amendment(s) was/were adopty the shareholders was/were sufficiently the shareholders was/were sufficiently the shareholders was/were sufficiently the shareholders was/were sufficiently the shareholders was/were adoptions. | nted by the shareholders. The number of votes east for the amendment(s) ficient for approval.   |                   |
|   | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): |                   |
| "The number of votes cast i   | or the amendment(s) was/were sufficient for approval  |                   |
| by  | (voting group)  |                   |
|   | (voting group)  |                   |
| The amendment(s) was/were adoption was not required.  | pied by the board of directors without shareholder action and shareholder   |                   |
| The amendment(s) was/were adoption was not required.  | oted by the incorporators without shareholder action and shareholder  |                   |
| Dated(1/29  | /18   |                   |
| ' /   |   |                   |
| Dated   | ihid har  |                   |
| (By∳āidi:   | rector, president or other officer - if directors or officers have not been   |                   |
|   | , by an incorporator - if in the hands of a receiver, trustee, or other court   |                   |
| appoint   | ed fiduciary by that fiduciary)   |                   |
| į   | MICHAEL A. GORY   |                   |
| -   | (Typed or printed name of person signing)   | <del></del>       |
| 1   | PRESIDENT   |                   |
| -   | (Title of person signing)   | <del></del> .     |