P67000034830

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





900274263129

06/22/15--01042--010 **135.00

15 JUN 22 PH 4: 25

Emmonum

JUL 01 2015 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporation	ons '-	,	%		• *
NAME OF CORPORAT	ion: Land	star Construc	tion Company	_lnc.	
DOCUMENT NUMBER:	P070	00003483	0		
The enclosed Articles of A	mendment and fee are su	abmitted for filing.			
Please return all correspond	dence concerning this ma	tter to the following:			
	Phillip	B. Rarick Name of Contact Perso	n	<u></u>	
 -	garick	and Beskin Firm/Company	, PA		
	6500	Coupen Ro	ad, Suite 2	204	
	Miami	Lakes / FL City/ State and Zip Cod	33014		
	PRarici E-mail address: (to be u	K & RaricKlaused for future annual report	v. com notification)	_	
For further information cor	ncerning this matter, pleas	se call:		15 JUN FALLAH	gestellaren.
	S. Rarick Ontact Person	at (<u>305</u> Area Co	556 - 520° de & Daytime Telephone	SECOND SE	
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:		- \ ->
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		ហ៊
	Address ent Section		Address Iment Section		

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Articles of Amendment

to

Articles	of	Incorp	oration
----------	----	--------	---------

of

Landstar Construction Company, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

SUR PARTIES

P07000034930

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of	he corporation:	
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," of	Corp," "Inc," or "Co". A pro	
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET	cable:	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u></u>	
D. If amending the registered agent and/or renew registered agent and/or the new registered	ered office address:	
Name of New Registered Agent New Registered Office Address:	Lanck & Beskir Loso) Cowpen (Florida street address) Liami Lakes (City)	1, PIT Rd., Suite 204 , Florida 33014 (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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.

Example:	ore, una sa	my onnin, or as an riaa.	
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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Edwin C. Lyons, Sr.	3720 NW 170 ST
Add			Miami Gardens, FL 33055
Remove			
2) X Change	PD	Edwin C. Lyons, Jr.	3720 NW 170 ST
Add		•	Miami Gardens, FL 33055
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attacti aaaiiionai sneels, ij	lditional Articles, ent f necessary). (Be sp	ecific)			
.					···-
				**	
-		••			
				-	
		<u></u>			
f an amendment provide provisions for implemen	s for an exchange, re	classification, or c	ancellation of issue	ed shares,	
(if not applicable, ina	licate N/A)	n not committee in	the unionalities is.	sen.	
			.		
·					
· · · · · · · · · · · · · · · · · · ·					
		 	<u></u>		
· · · · · · · · · · · · · · · · · · ·					

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
, , Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.	5)
	opproved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholded dopted by the incorporators without shareholder action and shareholder	er
Dated <u>)</u> (ine 12, 2015	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other cour inted fiduciary by that fiduciary)	t
	Shanda L Shingles	
	(Typed or printed name of person signing)	<u>≥</u> % ઝ
	Treasurer & Director	
	(Title of person signing)	22 PH 4: 25