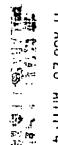
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
ı

Office Use Only



800302868038

09/28/17--01017--022 **35.00



FIED

AUG 30 2017

: TE

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATI	10N: Pr	emier San	ST Construction	In
DOCUMENT NUMBER:	<u> </u>	<u> </u>	ST Construction	
The enclosed Articles of A	mendment and fee are su	bmitted for filing.		
Please return all correspond	dence concerning this ma	tter to the following:		
		Name of Contact Person Firm/ Company Address City/ State and Zip Cod	Pcl 33067	
	E-mail address: (to be us	NIEVSPIDTE	notification)	
For further information con	Pollari	at (?i 5Y	<u> </u>	
Enclosed is a check for the	ontact Person		de & Daytime Telephone Number	
	□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)	
Mailing	Address	Straat	Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

FILED

•	to ·
•	Articles of Incorporation of 17 AUG 28 AM 11: 45
	Pramer SANT Construction struct
(<u>Name</u>)	of Corporation as currently filed with the Florida Dept. of State)
Pi	27600068337
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607. ts Articles of Incorporation:	.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new na	ame of the corporation:
	The new
	ntain the word "corporation," "company," or "incorporated" or the abbreviation mation "Corp," "Inc," or "Co". A professional corporation name must contain the ution," or the abbreviation "P.A."
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>	if applicable:
C. Enter new mailing address, if apple (Mailing address MAY BE A POST	
If amending the registered agent an new registered agent and/or the new registered agent	nd/or registered office address in Florida, enter the name of the w registered office address:
Name of New Registered Agent	
<u></u>	
	(Florida street address)
None Books and Office Address	9446 NW 46th Ct WORLSE 33351
New Registered Office Address;	(City) (Zip Code)
New Registered Agent's Signature, if c	
hereby accept the appointment as regis	tered 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: X Change	<u>PT</u> <u>J</u>	John Doc	•
X Remove	<u>V</u> <u>N</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) 💢 Change	<u>P</u> _	Juan Cirango	9446 NW 46th Ct Suncide FL 3335
Add			SUNGIOR FL 3335
Remove			
2) Change			
Add			
Remove			
3) Change			<u> </u>
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change		-	
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	
	
If an amendment provides for an each	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	
-	

	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
, (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 document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	e . C - 98
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	men!
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	lder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Dated 8/00/17 Signature Mein J Ariency	
(By adirector, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other c	en our!
appointed fiduciary by that fiduciary)	ourt
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	

. . . .