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15 OCT 19 TATO: 39

OCT 20 2015 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Weismore Constru	setion Inc	
DOCUMENT NUM	D07000092200		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Robert Weismore		
		Name of Contact Person	n
	-	Firm/ Company	
	2013 Jaffa Drive Unit C		
	Saint Cloud, FL 34771	Address	
		City/ State and Zip Cod	e
info	@weismoreconstruction.com		
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Robert Weismore		at (709-1837
Robert Weismore at (407) 709-1837 Name of Contact Person Area Code & Daytime Telephone		de & Daytime Telephone Number	
Enclosed is a check f	or 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)
An Di P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

15 00T 19 1111G: 39

(Name of Corporation	n as currently filed with the Florida Dept. of State)
P07000083200	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the cor	poration:
	The new
	"corporation." "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI	<u>RESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	9
D. If amending the registered agent and/or registere	ed office address in Florida, enter the name of the
new registered agent and/or the new registered o	The address.
	The address.
new registered agent and/or the new registered o	(Florida street address)
new registered agent and/or the new registered o	

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CFO	Raymond Bullen	2013 Jaffa Drive
Add			Unit C
X Remove			Saint Cloud, FL 34771
2) Change			
Add			-
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			,
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exch	nange, 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)	
	
<u>-</u>	
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The date of each amendment(s) adoption: _		, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of	s not meet the applicable statutory filing requirements, this of State's records.	date will not be listed as the
Adoption of Amendment(s) (C	CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient fo	ne shareholders. The number of votes cast for the amendment approval.	nt(s)
	the shareholders through voting groups. The following state ng group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for the am	nendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(v	voting group)	
☐ The amendment(s) was/were adopted by the action was not required.	ne board of directors without shareholder action and shareho	older
The amendment(s) was/were adopted by the action was not required.	ne incorporators without shareholder action and shareholder	
October 14, 2015 Dated	<u>//</u>	
S:		
Signature (By director pri	esident or other officer – if directors or officers have not be	
selected, by an in	accorporator – if in the hands of a receiver, trustee, or other coary by that fiduciary)	
Robert W	<i>l</i> 'eismore	
	(Typed or printed name of person signing)	_
President		
	(Title of person signing)	

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