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8/30/12 PW Amend

TALLAHASSEE FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: D+5 CONSTRUCTION MANAGEMENT, INC
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SUSAN Me DONE GAL Name of Contact Person
DAS CONSTRUCTION MANABEMENT INC. Firm/ Company
1516-644 STREET COURT E
BRADENTON PL 34008
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)

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

Street Address

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

Articles of Amendment to Articles of Incorporation

	of	· por attori	
		EMENT, INC	
(Name of Corporation as cu	rently filed with the Flo	rida Dept. of State)	
P	070000 8	6116	
(Document N	umber of Corporation (if I	known)	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	6, Florida Statutes, this Fi	lorida Profit Corporation adopts the following ame	ndment(s) to
A. If amending name, enter the new name	of the corporation:		
NA		The	new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	n "Corp," "Inc," or "C	" "company," or "incorporated" or the abbrevi o". A professional corporation name must contai	iation
B. Enter new principal office address, if a (Principal office address MUST BE A STRE		15/6-64\ ST CT E BANENTON PC	
(Frincipal office address MOST BE A STRE	LEI ADDRESS)	BRADENTON PC	
		3408	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) (5 16 - 64 4 57 CTE			TE
		DEADER TON PC	
D. If amending the registered agent and/o new registered agent and/or the new re		ss in Florida, enter the name of the	
Name of New Registered Agent	ALA		
Name of New Registered Agent			
	AA (Florida stree	at address)	
	,	is unuressy	
New Registered Office Address:	MA (Cital)	, Florida (Zip Code)	
	(City)	(Elp Code)	
New Registered Agent's Signature, if chan I hereby accept the appointment as registere	ging Registered Agent: d agent. I am familiar wi	ith and accept the obligations of the position.	
	λA		
Signa	MA ture of New Registered As	gent, 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:	s, una sany si	mm, or us un riuu.			
X Change	<u>PT</u> <u>Jol</u>	John Doe			
X Remove	<u>V</u> <u>Mi</u>	<u>Mike Jones</u>			
X Add	SV Sa	lly Smith			
Type of Action (Check One)	<u>Title</u>	Name	Address		
1) Change	PT	DAMILO RECARDI	3043 LEMAY LAWE NORTH PORT FR		
Add					
Remove			31086		
2) Change	PT	SUSAD Mª CONECAL	1516-644 ST CTE		
Add					
Remove			<i>34008</i>		
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	VA.
 	
	
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f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the amo (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
N	<i>A</i>
,	

The date of each amendment(s) adoption:	AUGUST 9. 2012
Effective date if applicable:	AUGUST P. 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for	ne shareholders. The number of votes cast for the amendment(s) r approval.
	the shareholders through voting groups. The following statement ng group entitled to vote separately on the amendment(s):
"The number of votes cast for the am	nendment(s) was/were sufficient for approval
by	,,
6	poting group)
☐ The amendment(s) was/were adopted by the action was not required.	ne board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the action was not required.	ne incorporators without shareholder action and shareholder
DatedAUGU.	57 9, 2012
Signature	me male
	esident or other officer if directors or officers have not been
	ncorporator – if in the hands of a receiver, trustee, or other court ary by that fiduciary)
	XISAN Mª COONETOAC
	(Typed or printed name of person signing)
	VICE - PRESIDENT
	(Title of person signing)