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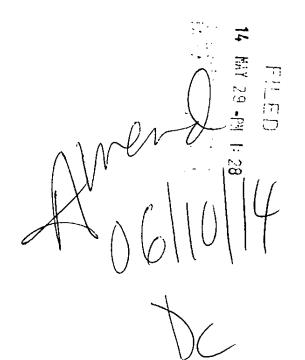
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: TRUE EXP	ERIENCE CONS	TRUCTION , INC	
DOCUMENT NUME	BER: P0700009706	6		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	JERRY W MCCC	Υ		
		Name of Contact Persor	1	
	TRUE EXPERIE	NCE CONSTRU	CTION, INC	
		Firm/ Company		
	775 BONITA RO	AD		
		Address		
	ATLANTIC BEAC	CH, FL 32233		
		City/ State and Zip Code	<b>*</b>	
	F	3 E . C		
	E-mail address: (to be u	sed for future annual report	nontication)	
For further information	n concerning this matter, pleas	se call:		
JERRY W M	CCOY	at (904	, 210-4911	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	ertment 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)	
Mai	iling Address	Street	Address	
Amendment Section		Amendment Section		
	ision of Corporations	Division of Corporations		
	. Box 6327	Clifton Building		
I air	ahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

## TRUE EXPERIENCE CONSTRUCTION, INC.

(Name of Corporation as currently filed with the Flo		
P0700097066	rida Dept. of State	
(Document Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this FI its Articles of Incorporation:	orida Profit Corporation adopts the following	3 amendment(s)
A. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must o	bbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	-
	<del></del>	. 🛶
	.:.	. 4
	-	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	11_E
Name of New Registered Agent N/A		. 3 B
		· · · · · · · · · · · · · · · · · · ·
(Florida street	address)	28
New Registered Office Address:	, Florida	
(City)	(Zîp Code)	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with Signature of New Registered Agent.		

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)	Title	<u>Name</u>		Address	
1) Change	V	PATRICK	R. MCCOY	775 BONITA ROAD	
Add				ATLANTIAC BEACH FL	
Remove				32233	
2) Change					
Add					
Remove					
3) Change				<del></del>	
Add					
Келюче				<del> </del>	_
4) Change					
Add					
Remove					
5) Change		_		· · · · · · · · · · · · · · · · · · ·	
Add					
Remove					
6) Change		_			
Add					
Remove					

E. <u>If an</u> (Atta	mending or adding additional Articl ach additional sheets, if necessary).	es, enter chang (Be specific)	e(s) here:			
N/A						
			<del></del>			
				.,		
					<del> </del>	
		err∎				
				-		
. If si	n amendment provides for an excha	nge, reclassifica	ition, or cancel	lation of issued :	shares.	
pro	ovisions for implementing the amen	dment if not co	tained in the a	mendment itself	<u> </u>	
	(if not applicable, indicate N/A)					
N/A						
					·	
	deliable de francisco de la constitución de la cons			•		

date this document was signed		, ii omer man me
Effective date if applicable:	05/20/2014	
	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes east for the amendment(s) rere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.  The amendment(s) was/we	re adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder	
action was not required.  Dated 05/2	2012014 Mach	
Si	By a director, president or other officer if directors or officers have not been elected, by an incorporator if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	JERRY W MCCOY	
	(Typed or printed name of person signing)	<u></u>
	PRESIDENT	_
	(Title of person signing)	