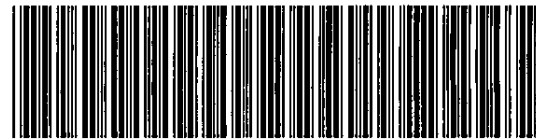


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Amcl

JUN 05 2017

R. W.

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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Office Use Only

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BOUYGUES CIVIL WORKS FLORIDA, INC

DOCUMENT NUMBER: P07000098670

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROSALIE SHIRLEY

Name of Contact Person

BOUYGUES CIVIL WORKS FLORIDA, INC

Firm/ Company

2 S. BISCAYNE BLVD, SUITE 1800

Address

MIAMI, FL 33131

City/ State and Zip Code

r.shirley@bcwf-miami.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rosalie Shirley

Name of Contact Person

at (305)

8941800

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

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

17 MAY 30 PM 2:29

BOUYGUES CIVIL WORKS FLORIDA, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P07000098670

(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 the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (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:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>Change</u>	<u>C</u>	<u>CHRISTIAN GAZAIGNES</u>	<u>54 RUE REMONT</u>
<u>Add</u>			<u>78000 VERSAILLES</u>
<u>X</u> Remove			<u>FRANCE AF</u>
2) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
3) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
4) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
5) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
6) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			

(Attach additional sheets, if necessary). (Be specific)

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(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 date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"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.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

April 25, 2017
Dated _____

Signature SEE ATTACHED LETTER
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

PHILLIPPE AMEQUIN

(Typed or printed name of person signing)

CHIEF EXECUTIVE OFFICER

(Title of person signing)

**UNANIMOUS WRITTEN CONSENT
IN LIEU OF THE 2017 ANNUAL MEETING OF SHAREHOLDERS
OF**

BOUYGUES CIVIL WORKS FLORIDA, INC.

The undersigned, being the sole shareholder of **BOUYGUES CIVIL WORKS FLORIDA, Inc.**, a Florida corporation (the "Corporation"), does hereby adopt and consent to the adoption of the following actions in lieu of the Annual Meeting of the Shareholders:

WAIVER OF NOTICE:

Execution of this consent shall constitute full waiver of notice of the Annual Meeting of Shareholders of the Corporation for the year 2017.

ELECTION OF DIRECTORS:

The following persons are elected as Directors of the Corporation to serve until the next Annual Meeting of the Shareholders or until his successors shall be duly elected and qualified:

Marc ADLER
Giuseppe FOLCO

APPROVAL OF 2016 ANNUAL FINANCIAL STATEMENTS:

The corporation's 2016 Fiscal Year consolidated accounting closed on December 31, 2016 with an Annual Report prepared by Kaufman, Rossin & Co., PA, are hereby approved. Said report shows net loss for the year amounting to \$ 543,250 after satisfaction of all liabilities and accumulated losses are amounting to \$21,534,581.

RATIFICATION:

All acts taken by the Corporation's Directors since the last meeting of the shareholders are hereby ratified and approved.

MINUTES:

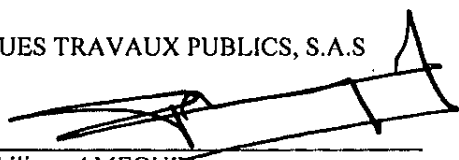
This Unanimous Consent shall be filed with and become a part of the Minutes of the Corporation.

Effective Date: April 25, 2017.

SOLE SHAREHOLDER:

BOUYGUES TRAVAUX PUBLICS, S.A.S

Date signed : 11/05/2017

By: 
Name: Philippe AMEQUIN
Title: Chief Executive Officer,

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BOUYGUES CIVIL WORKS FLORIDA, INC

DOCUMENT NUMBER: P07000098670

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ROSALIE SHIRLEY

Name of Contact Person

BOUYGUES CIVIL WORKS FLORIDA, INC

Firm/ Company

2 S. BISCAYNE BLVD, SUITE 1800

Address

MIAMI, FL 33131

City/ State and Zip Code

r.shirley@bcwf-miami.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rosalie Shirley

at (305) 8941800

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

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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