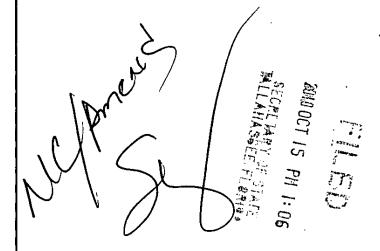
| (Re                     | equestor's Name)    |             |
|-------------------------|---------------------|-------------|
| (Ad                     | ddress)             |             |
| (A                      | ddress)             |             |
| (C                      | ity/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT              | MAIL        |
| (Bi                     | usiness Entity Nar  | ne)         |
| (Di                     | ocument Number)     |             |
| Certified Copies        | Certificates        | s of Status |
| Special Instructions to | Filing Officer:     |             |
|                         |                     |             |
|                         |                     |             |
|                         |                     |             |
|                         |                     |             |



10-15-10



10/15/10--01024--011 \*\*35.00



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO  | DRATION:                                   | BON CONSTRUCTION, INC.   |
|--|--|--|
| DOCUMENT NUM   | 1BER:                                      | P07000100325   |
| The enclosed Article   | es of Amendment and fee a                  | re submitted for filing.   |
| Please return all corr   | respondence concerning th                  | s matter to the following:   |
| _  |  | RIK BONVISUTO ame of Contact Person  |
|  | ľ  | ame of Contact Person  |
| _  | BON  | CONSTRUCTION INC   |
|  |  | Firm/ Company  |
|  | 5029 CARENGIE LANE APT 105                 |  |
| ·  |  | Address  |
|  | SA   | NFORD, FL 32771  |
| _  |  | ity/ State and Zip Code  |
|  | OLSON                                      | INS@LCIA.COM   |
|  | E-mail address: (to be use                 | d for future annual report notification)   |
| For further informat   | ion concerning this matter,                | please call:   |
|  | K BONVISUTO                                | at ( <u>352</u> ) <u>636-8825</u>  |
| Name o   | f Contact Person                           | Area Code & Daytime Telephone Number   |
| Enclosed is a check  | for the following amount n                 | ade payable to the Florida Department of State:  |
| ▼ \$35 Filing Fee  | \$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & S52.50 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

| Articles of A  |   |
|--|---|
| to   |   |
| Articles of In of  | corporation   |
|  | ' Con the second  |
| . BON CONSTRUCTIO  |   |
| (Name of Corporation as currently filed with   | h the Florida Dept. of State)                               |
| P0700010032  | <u>5</u>  |
| (Document Number of Corpora  | ation (if known)  |
| ursuant to the provisions of section 607.1006, Florida Stat<br>mendment(s) to its Articles of Incorporation:   | tutes, this Florida Profit Corporation adopts the following |
| . If amending name, enter the new name of the corporati  | ion:  |
| BON CONCRETE & MASO  | ONRY, INC. The new  |
| bbreviation "Corp.," "Inc.," or Co.," or the designation "ame must contain the word "chartered," "professional associated the word "chartered," "professional associated the word "chartered the word "chartered the word "chartered," "professional associated the word "chartered the word "chartered the word "chartered the word "chartered the word "chartered" "professional associated the word "chartered the word "char | ciation," or the abbreviation "P.A."                        |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   | PO BOX 1693   |
|  | SORRENTO, FL 32776  |
| . If amending the registered agent and/or registered office new registered agent and/or the new registered office and and of New Registered Agent:   |   |
| New Registered Office Address: (Flo  | orida street address)                                       |
|  |   |
| (City  | , Florida<br>v) (Zip Code)                                  |
| (Cii)  | γ) (Στρ Coue)   |
| ew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am far  |   |

## 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)

| <u>Title</u> | <u>Name</u>   | Address  | Type of Action    |
|--------------|---|--|-------------------|
| <u>'VP</u>   | RICHARD BONVISUTO   | 15734 ACORN CIRCLE<br>TAVARES, FL 32778        | ☐ Add<br>☑ Remove |
| D            | TREVOR WILSON   | 5029 CARNEGIE LANE APT 10<br>SANFORD, FL 32771 | ☐ Add<br>☑ Remove |
|              |   |  | ☐ Add<br>☐ Remove |
|              | ng or adding additional Articles, enter citional sheets, if necessary). (Be specifi                   |  |                   |
| provision    | ndment provides for an exchange, reclass for implementing the amendment if napplicable, indicate N/A) |  |                   |
|              |   |  |                   |
|              |   |  |                   |
|              |   |  |                   |

| The date of each amendment                         | (s) adoption: 10/12/10   |
|--|--|
|  | (date of adoption is required)   |
| Effective date <u>if applicable</u> :              | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                           | (CHECK ONE)  |
| The amendment(s) was/we by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.   |
|  | re approved by the shareholders through voting groups. The following statement of 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/we action was not required.   | re adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/we action was not required.   | re adopted by the incorporators without shareholder action and shareholder   |
|  | 10-12-10   |
| Signature  | a director, president or other officer – if directors or officers have not been  |
|  | ected, by an incorporator – if in the hands of a receiver, trustee, or other court   |
|  | ointed fiduciary by that fiduciary)  |
|  | ERIK BONVISUTO   |
|  | (Typed or printed name of person signing)  |
|  | PRESIDENT  |
|  | (Title of person signing)  |