

Office Use Only



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TALLAMASSEE, FLORIDA

SEP 10 2015 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | RATION: <i>MAINSTRE</i> | AM CONSTRUCTION | ON AND DEVELOPMENT, | INC. |
|--|--|--|--|------|
| | BER: <u>P0700</u> | | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | | |
| Please return all corres | spondence concerning this ma | atter to the following: | | |
| | JIM | WILCOX Name of Contact Person | | |
| | | Name of Contact Perso | n | |
| | MAINSTREAM C | ONSTRUCTION & Firm/ Company | DEVELOPMENT | |
| | | | SUITE 101 | |
| | TALLAHASSEE, | FLORIDA 3 | 2308 le | |
| | | City/ State and Zip Coo | le | |
| | | | | |
| | JWILCOX W | MAINSTREAMC | AD. COM notification) | |
| | E-man address. (to be u | sed for future annual repor | notification | |
| For further information | n concerning this matter, pleas | se call: | | |
| JIM W | ILCOX | at (850 | ode & Daytime Telephone Number | |
| Name o | of Contact Person | Area Co | ode & Daytime Telephone Number | |
| Enclosed is a check for | r the following amount made | payable to the Florida Dep | artment of State: | |
| □ \$35 Filing Fee | 也\$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 | | Amen Divisi Cliftor 2661 I | Address Idment Section on of Corporations In Building Executive Center Circle assee, FL 32301 | |

Articles of Amendment to Articles of Incorporation

MAINSTREAM CONSTRUCTION & DEVELOPMENT CORPSEP-8 PH 1:00

1 1 1 17

| (Name of Corporation as curren | tly filed with the Florida Dept. of State) |
|--|---|
| P070001163 | 23 JALLAHASSEE FLO |
| | of Corporation (if known) |
| ursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation: | s Florida Profit Corporation adopts the following amendment |
| . If amending name, enter the new name of the corporation: | |
| | The new |
| ame must be distinguishable and contain the word "corporati Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the |
| Enter new principal office address, if applicable: | 2509 BARRINGTON CIRCLE |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | SUITE 101 |
| | TALLAHASSEE, FL. 32308 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| | |
| | |
| If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre | |
| Name of New Registered Agent | _ |
| Name of New Registered Agent | |
| (Florida s | street address) |
| New Registered Office Address: | . Florida |
| | (City) (Zip Code) |
| New Registered Office Address: | , Florida |
| Registered Agent's Signature, if changing Registered Ager | <u>ıt:</u> |
| hereby accept the appointment as registered agent. I am familian | r 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 Joh | n Doe | |
|----------------------------|-----------------------|-----------------|------------------|
| X Remove | <u>V</u> <u>Mil</u> | ke Jones | |
| _X Add | <u>SV</u> <u>Sall</u> | ly <u>Smith</u> | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | JOHN C. KENNY | 241 E. GTH AVE. |
| X Add | | | TALLAHASSEE, FL. |
| Remove | | | <u>32303</u> |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| Allach aa | dditional sheet | z additional Art ts, if necessary). | (Be specific) | | | | |
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| lf an amo | endment prov | vides for an excl | hange, reclassif | ication, or can | cellation of iss | ued shares, | |
| provisio (if n | ons for implen not applicable, | nenting the ame indicate N/A) | endment if not o | contained in th | e amendment | itself: | |
| | | | | | | | |
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| tion: | , if other than the |
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| | |
| 02 SEPTEMBER 2015 | |
| (no more than 90 days after amendment file date) | |
| | date will not be listed as the |
| (<u>CHECK ONE</u>) | |
| | nt(s) |
| | ement |
| the amendment(s) was/were sufficient for approval | |
| ,, | |
| (voting group) | |
| | |
| | |
| y an incorporator - if in the hands of a receiver, trustee, or other c | |
| (Typed or printed name of person signing) | |
| PRESIDENT / REGISTERED AGE (Title of person signing) | NT |
| | In the amendment(s) was/were sufficient for approval (voting group) (voting |