P07000117526

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TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MAJESTIC	RESIDENTIAL CO	NTRACTORS INC				
	_{ER:} <u>P0700011752</u>						
	f Amendment and fee are su						
Please return all corresp	ondence concerning this ma	tter to the following:					
,	WILLIAM ANDRACA						
_	Name of Contact Person						
i	MAJESTIC RESIDENTIAL CONTRACTORS INC						
_		Firm/ Company					
+	8290 IBIS CLUB LN. APT 909						
_		Address					
<u> </u>	NAPLES FL 34104						
	City/ State and Zip Code						
maj	esticnaples@gm	ail.com					
		sed for future annual report	notification)				
For further information	concerning this matter, pleas	se call;					
WILLIAM ANI	DRACA	at (239	601-5374				
Name of Contact Person		Area Co	de & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Depa	ortment 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 Articles of Incorporation (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: 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 <u>MUST BE A STREET ADDRESS</u>) 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) 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

	ing additional Art ects, if necessary).	(Be specific)			
					
		•			
					
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	· · · · · · · · · · · · · · · · · · ·				
If an amendment p	rovides for an exc	hange, reclassific	ation, or cancellat	ion of issued share	.
11 till tilletiantent p	lementing the ame	endment if not co	ntained in the am	endment itself:	<u>-1</u>
provisions for imp	ble, indicate N/A)				
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The date of each amendmen	t(s) adoption: 9/11/14	, if other than the
date this document was signed		
Effective date if applicable:	9/11/14 (no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	are adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voling group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated_9/1	1/14	
Signature_		
(J S	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 count appointed fiduciary by that fiduciary)	
	WILLIAM ANDRACA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	