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A. Butter 10/8/21

COVER LETTER

.

TO: Amendment Section Division of Corporations

NAME OF COI	RPORATION: PRO-LINE CO	ONSTRUCTION INC	
DOCUMENT N	P07000124068		
The enclosed Ar	ticles of Amendment and fee ar	re submitted for filing.	
Please return all	correspondence concerning this	s matter to the following:	
	SANTO J VILARDI		
		Name of Contact Person	1
	PRO-LINE CONSTRUC	CION, INC	
		Firm/ Company	
	4411 PROCTOR ROAD		
		Address	
	SARASOTA FL 34233		
		City/ State and Zip Cod	e
	SAM@PROLINERETA	ILCONSTRUCTION.COM	
	E-mail address: (to l	be used for future annual report	notification)
For further infor	mation concerning this matter,	please call:	
SANTO J VILA	RDI	at (<u>941</u>	504-6055
N	lame of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a che	eck for the following amount m	nade payable to the Florida Dep	artment of State:
S35 Filing F	See □\$43.75 Filing Fee Certificate of State	-	S52.50 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	Ameno Divisio The C 2415	Address Iment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

FIED

PRO-LINE CONSTRUCTION, INC		2021 SEP 29 PM 12: 45
(Name o	f Corporation as current	ly filed with the Florida Dept. of State)
P07000124068		EUVC, LIOF STATE
	(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
NA		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association,"	Corp," "Inc," or "Co".	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word "
B. Enter new principal office address,	if annlicable:	4411 PROCTOR ROAD
(Principal office address MUST BE A S		SARASOTA FL 34233
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	icable: OFFICE BOX)	4411 PROCTOR ROAD
1. Future & sources 14474 Day 77 1 Cox.	<u> </u>	SARASOTA FL 34233
D. If amending the registered agent an	nd/or revistered office add	dress in Florida, enter the name of the
new registered agent and/or the new		
Name of New Registered Agent NA		
	(Florida s	treet address)
New Registered Office Address:	NA	. Florida
New Registered Office Address		(City) (Zip Code)
New Registered Agent's Signature, if of I hereby accept the appointment as registered.	hanging Registered Agen tered agent. I am familian	nt: with and accept the obligations of the position.
	Signature of New	Registered Agent, if changing
	orginality by New	
Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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: XChange	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_	NA	
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		-		
				-
Remove				

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
NA	
	w
	-
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
NA	

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	9/27/21
The date of each amendment(s)	adoption:, if other than the
date this document was signed.	
	7/21
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad action was not required.	lopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
must be separately provided fo	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s): t for the amendment(s) was/were sufficient for approval ""
<u> </u>	(voting group)
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	SANTO J VILARDI
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

• • •