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SECRETARY OF STATE
TALLAHASSEF FINALE

Amend
C.COULLIETTE
APR 0 9 2009
EXAMINER

COYER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: D&D MASONRY CONTRACTORS INC							
DOCUMENT NUMBER	:_P0800000	8147		b			
The enclosed Articles of A	mendment and fee a	re submitted	for filing.				
Please return all correspon	dence concerning thi	is matter to th	he following:				
	·	MY R DEDM					
(Name of Contact Person)							
D&D MASONRY CONTRACTORS INC							
(Firm/ Company)							
5125 ROMNEY STREET #2							
		(Address)					
	JACKS	ONVILLE, FL	32211				
	(City/ S	tate and Zip Co	ode)				
For further information co	ncerning this matter,	please call:					
JIMMY R DEDMON		~~ \ <u></u>	904) 743-08				
(Name of Cont	act Person)	(,	Area Code & Daytii	ne Telephone Number)			
Enclosed is a check for the	e following amount n	nade payable	to the Florida D	epartment of State:			
	13.75 Filing Fee & ertificate of Status	Certif (Addi	5 Filing Fee & fied Copy tional copy is osed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address		***************************************	Address	•			
Amendment Section Division of Corporations			Amendment Section Division of Corporations				
P.O. Box 6327		Clifton	Clifton Building				
Tallahassee, FL 32	314		xecutive Center ssee, FL 32301	Circle ···			

Articles of Amendment to Articles of Incorporation

D&D MASONRY CONTRACTORS INC

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

P08000008147

(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 "incorporated" or the abbreviation "Corp" ("Co". A professional corporation nassociation," or the abbreviation "P.A."	o.," "Inc.," or Co.	," or the designation "C	orp," "Inc," or
B. Enter new principal office address, if a	applicable:	1525 ROMNEY STREE	Т #2
(Principal office address <u>MUST BE A STR</u>	EET ADDRESS)	JACKSONVILLE, FL 33	2211
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		1525 ROMNEY STREET #2	
		JACKSONVILLE, FL 32211	
D. If amending the registered agent and/onew registered agent and/or the new r			r the name of th
	JIMMY R DEDMON		
Name of New Registered Agent:	JIMMY R DEDN	ION	
Name of New Registered Agent:	JIMMY R DEDI		
Name of New Registered Agent: New Registered Office Address:	1525 ROMNEY		
	1525 ROMNEY	ST #2 da street address)	, Florida <u>32211</u>

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

Page 1 of 3

1Famending 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>	<u>A</u>	ddress	Type of Action
PRES	KENNETH R DEDMON		27 GORDEAN RD CKSONVILLE, FL 3	☐ Add 2221 ☐ Remove
PRES	JIMMY R DEDMON		25 ROMNEY ST #2 CKSONVILLE, FL 3	
<u>VP</u>	JIMMY R DEDMON		25 ROMNEY ST #2 CKSONVILLE, FL 3	Add 32211 □ Remove
	ing or adding additional Artiditional sheets, if necessary).			
F. If an am	endment provides for an excl ns for implementing the ame	hange, reclassif	ication, or cancellat	ion of issued shares,
(if no	t applicable, indicate N/A)			
Jimr	ny Dedmon	100%	of 500	shares
_Kenn	eth Deamon	0		