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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: ALL CONS	TRUCTION SYST	EMS, INC.
DOCUMENT NUMBE	R: <u>P080000 3767</u>	6	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
	DANIEL ACEV	EDO Sr.	
		Name of Contact Person	1
		Firm/ Company	
	845 VANDA TI	ER	
_		Address	<u></u>
	₩ESTON, FL.	33327	
 -		City/ State and Zip Code	e
	dam@allcons	tructionsystems	.com
	E-mail address: (to be us	sed for future annual report	notification)
For further information o	oncerning this matter, pleas	se call:	
DANIEL AC	EVEDO	at (954	663 2078
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the	he following amount made	payable to the Florida Depa	artment of State:
录 \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐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		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Articles of Amendment

to

Articles of Incorporation

as currently filed with the Florida Dept. of State) Continuous of Corporation (if known) Statutes, this Florida Profit Corporation of the innerting afficient form. The new "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A." RESS) d office address in Florida, enter the name of the ffice address: (Florida street address) Florida (Zip Code)	All Construc	tion System	ms, InFILE	D
Statutes, this Florida Profit Corporation Secretary of Statutes, this Florida Corporation Secretary of Statutes, the Statutes of Statutes, the Statute	(Name of Corporation	n as currently filed with th		_
Statutes, this Florida Profit Corporation and the Interesting afficient mention: The new "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A." RESS) d office address in Florida, enter the name of the ffice address: (Florida street address) Florida (City) Florida (City)	400000	37676		P 9 01
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"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A." RESS) d office address in Florida, enter the name of the ffice address: (Florida street address)	If amending name, enter the new name of the con	rporation:		
"Inc," or "Co". A professional corporation name must contain the bbreviation "P,A." RESS) d office address in Florida, enter the name of the ffice address: (Florida street address) Florida (City) (Zip Code)		•		The new
d office address in Florida, enter the name of the flice address: (Florida street address) , Florida	rd "chartered," "professional association," or the a	abbreviation "P,A."	ssional corporation name mu	st contain the
d office address in Florida, enter the name of the ffice address: (Florida street address) , Florida (City) (Zip Code)	Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADD.			
d office address in Florida, enter the name of the ffice address: (Florida street address) , Florida (City) (Zip Code)				
d office address in Florida, enter the name of the ffice address: (Florida street address) , Florida (City) (Zip Code)				
d office address in Florida, enter the name of the ffice address: (Florida street address) , Florida (City) (Zip Code)	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	v:		
(Florida street address) , Florida (City) (City) (Zip Code)	(Maining dualess MAT BE A TOST OF TICE BO	<u> </u>		
(Florida street address) , Florida (City) (City) (Zip Code)				
(Florida street address) , Florida (City) (City) (Zip Code)				··
(Florida street address), Florida (City) (Zip Code)	If amending the registered agent and/or register	ed office address in Florida	, enter the name of the	
, Florida, City) Coder	new registered agent and/or the new registered of	office address:		
, Florida, City) Coder	Name of New Registered Agent			
City) . Florida, Florida				
(City) Aip Coder		(Florida street address)		
	New Registered Office Address:		, Florida	
itered Agent:		(City)	(2.)	ip Coder
	Name of New Registered Agent	(Florida street address) (City) stered Agent:	t the obligation	as a
	Signa	nture of New Registered Agen	nt, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, at 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 = Chi Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officheld. 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe			
X Remove	$\underline{\mathbf{v}}$	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>			<u>Addres</u> s
1) Change	VPT	soc	ORRO E. ACE	VEDO	845 VANDA TER
Add					WESTON, FL. 33327
X Remove					
2) Change	Project	Manager D	ANIEL F. ACE	VEDO Jr.	1453 WAJESTY TER
Add					₩ESTON, FL. 3332
X_ Remove					
3) Change					
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
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6) Change		_			
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on amendment ne	ovides for an exchan	ment if not contain	ed in the amendme	ent itself:	
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f an amendment proportion of the provisions for implementable (if not applicable)	ementing the amendi				

The date of each amendment(s) adoption:	JULY 26/2019	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department o	not meet the applicable statutory filing requirements, this dat f State's records.	te will not be listed as th
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s approval.)
	ne shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):	ni
"The number of votes east for the ame	endment(s) was/were sufficient for approval	
by	**	
(ve	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	г
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	
Dated JULY 26/20	Haue V	
(By a director, not	sident or other officer discussions or officers have not been	
selected, by an inc	corporator – if in the hands of a receiver, trustee, or other court y by that fiduciary)	l
	DANIEL F. ACEVEDO SR.	
	(Typed or printed name of person signing)	
	(PS) PRESIDENT	
	(Title of person signing)	