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	COVER LETTE				
TO: Amendment Section Division of Corporations		, ž	Ÿ		
NAME OF CORPORATION: SKILCON CONST	RUCTION COMPA	Y, INC.			
DOCUMENT NUMBER: P08000047291					
The enclosed Articles of Amendment and fee are sub	mitted for filing.				
Please return all correspondence concerning this matt	er to the following:				
KENNETH COLIN KEPLEY	,				
	Name of Contact Pe	rson			
SKILCON CONSTRUCITON	COMPANY, INC.				
	Firm/ Company				
1314 EAST LAS OLAS BLV	D. SUITE 7				
	Address				
FORT LAUDERDALE, FL 3	3301				
	City/ State and Zip (Code			
COLIN.KEPLEY@GMAIL.COM					
E-mail address: (to be use	d for future annual re	port notification)			
	ĺ				
For further information concerning this matter, please	call:				
KENNETH COLIN KEPLEY	954 at (817-4016			
Name of Contact Person	Arca	Code & Daytime Telephone Number	_		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	An Div Gli 260	reet Address nendment Section vision of Corporations fron Building 51 Executive Center Circle illahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

SKILCON CONSTRUCTION COMPANY, INC.

(Name of Corporation as currently	filed	with the Florida Dept. of State)
P08000047291		
(Document Number of	Согро	ration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida	Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
SKILCON, INC.		The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	o .	ompany," or "incorporated" or the abbreviation
B. Enter new principal office address, if applicable:	(NA	A)
(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)	(N)	A)
		· · ·
D. If amending the registered agent and/or registered office addresses registered agent and/or the new registered office address:	ess in	Florida, enter the name of the
Name of New Registered Agent		
Name of New Neganerea rigeri	Ì	
(Florida stre	et addr	ress)
New Registered Office Address:	!	. Florida
	City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar was		ad accept the obligations of the Francisco P
. ,		45 0

address of each Officer and/or 1 (Attach additional sheets, if neces, Please note the officer/director tit P = President; V= Vice Presiden Executive Officer; CFO = Chief held, President, Treasurer, Direct Changes should be noted in the fo	Director being added: sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= Dire Financial Officer. If an officer/director or would be PTD. ollowing manner. Currently John Doe is teleproration, Sally Smith is named the V a	ctor; TR= Trustee; C = Chairman or Clerk; CFO = Chief holds more than one title, list the first letter of each office listed as the PST and Mike Jones is listed as the V. There is had S. These should be noted as John Doe, PT as a Change,
X Change PT	John Doe	
\underline{X} Remove \underline{V}	Mike Jones	
X Add SV	Sally Smith	
Type of Action (Check One) Title	<u>Name</u>	<u>Addres</u> s
1) Change		
Add		
Remove		
2) Change	_	
Add		
Remove		
3) Change		
Add		
Remove		
4) Change	_	
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		

_ Add

_ Remove

incellation of issued shares, the amendment itself:

The date of each amendment(s) adoption this document was signed.	JOLY 14, 2017 ption:	, if other than the
C		
Effective date <u>if applicable</u> :	(no more than 90 day,	s after amendment file date)
Note: If the date inserted in this blo document's effective date on the Depa		statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopt by the shareholders was/were suffi		per of votes east for the amendment(s)
☐ The amendment(s) was/were appromust be separately provided for ea		voting groups. The following statement eparately on the amendment(s):
"The number of votes cast fo	r the amendment(s) was/were suff	icient for approval
by	(voting group)	."
☐ The amendment(s) was/were adopt action was not required.		ut shareholder action and shareholder
The amendment(s) was/were adopt action was not required.	ed by the incorporators without sh	pareholder action and shareholder
JULY 14, 20 Dated	17	
Signature	1 to 1/1	<u> </u>
selected,		f directors or officers have not been ls of a receiver, trustee, or other court
K	ENNETH COLIN KEPLEY	
	(Typed or printed name	of person signing)
P	RESIDENT	
_	(Title of per	son signing)