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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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Amand 10,23,10

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	MATHEW'S CONTRACTORS	S INC	
DOCUMENT NU	JMBER:	P08000066134		
The enclosed Artic	cles of Amendment and	fee are submitted for filing.		
Please return all co	orrespondence concerni	ng this matter to the following:		
		JUAN M CARMONA		
		Name of Contact Person		
	MAT	HEW'S CONTRACTORS INC		
		Firm/ Company		
	1412 W WATERS AVE, SUITE 207			
		Address		
	TAMPA, FL 33604			
		City/ State and Zip Code		
	mai E-mail address: (to	hewscont@yahoo.com be used for future annual report notification)		
For further inform	ation concerning this m	atter, please call:		
	Juan Carmona	at ( 813 ) 918	3-1067	
Name	e of Contact Person	Area Code & Daytime Telep	phone Number	
Enclosed is a chec	k for the following amo	unt made payable to the Florida Departn	nent of State:	
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	<del>-</del>	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	\	
		Tallahassee, FL 32301	)	

#### **Articles of Amendment** to **Articles of Incorporation** of

## MATHEW'S CONTRACTORS INC

(Name of Corporation as current	ly med with the Florida	a Dept. of State)	
P0800	00066134		
(Document Numbe	er of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, lamendment(s) to its Articles of Incorporation:	Florida Statutes, this <i>Fl</i>	lorida Profit Corporation ad	opts the followin
A. If amending name, enter the new name of th	e corporation:		
			The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the dename must contain the word "chartered." "profes	esignation "Corp," "Inc	e," or "Co". A professional	ted" or the corporation
B. Enter new principal office address, if application (Principal office address MUST BE A STREET)			_
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>	**BOX)		TALLAHASSEE, FLOWING
D. <u>If amending the registered agent and/or reg</u> new registered agent and/or the new registe	istered office address is red office address:	n Florida, enter the name of	the 5
Name of New Registered Agent:		<del></del>	
<u>New Registered Office Address:</u>	(Florida street a	address)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent	Registered Agent: nt. I am familiar with a	nd accept the obligations of t	he position.
Sign	nature of New Registered	d Agent if changing	

# 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
TRS	RYAN S HIPPLE	1412 W WATERS AVE SUITE 207 TAMPA, FL 33604	
<del></del>			
	ding or adding additional Articles, dditional sheets, if necessary). (Be		
	×		
<u>provisi</u>		ge, reclassification, or cancellation of ent if not contained in the amendm	

The date of each amendment(s	) adoption: 04/19/10
Effective date if applicable:	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	voting group) ."
(1	oung group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
DatedO	1/19/19
select	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)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)