08000 110373

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Au	uiess)	
(Cit	y/State/Zip/Phone	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

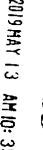
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: OVURDU CONS	TRUCTION AND DEVEL	OPMENT INC.
DOCUMENT NUM	P08000110373		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JOSEPH A ARTILES		
	.	Name of Contact Perso	n
		Firm/ Company	
	12 Trilby Branch		
		Address	
	Longwood, FL 32779		
		City/ State and Zip Cod	le
joser	hartiles@me.com		,
	E-mail address: (to be u	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
JOSEPH A ARTILE	S	at (487-0556
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ameno Divisio Cliftor	Address Identify Section of Corporations In Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

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(Name of Corporation as e	currently filed with the Florida Dept. of State)
P08000110373	
(Document Nu	imber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion:
EXECUTIVE CONTRACTING SOLUTIONS INC.	∠The new
	poration," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)
	2019 H
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A ₹% ₩ ₩
	Sec 💂 🛅
	<u> </u>
D. If amending the registered agent and/or registered offi	ice address in Florida, enter the name of the
new registered agent and/or the new registered office a	
Name of New Registered Agent N/A	
(Fla	orida street address)
N/A	
New Registered Office Address:	(City) , Florida (Zip Code)
	(Suppose)
New Registered Agent's Signature, if changing Registered	l Agent:
I hereby accept the appointment as registered agent. I am fa	uniliar with and accept the obligations of the position.
Sienature o	f New Registered 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)

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: X Change	е. ала за <u>РТ</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		N/A	-
Add			
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)	
N/A	
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)	
N/A	

	05/09/2019	
The date of each amendment(s) date this document was signed.	adoption:	, if other than th
	5/09/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a 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):	nt
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required.	idopted by the board of directors without shareholder action and shareholder	r
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
()5/09/20 Dated	119	
124160		
Signature		
(By a	a director, president or other officers if directors or officers have not been	
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court	
appe	ointed fiduciary by that fiduciary)	
	JOSEPH A. ARTILES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	