# P09000037948

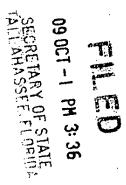
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION:	DN: D & D VILLAGE CONSTRUCTION, INC			
DOCUMENT NU	NUMBER:P09000037948				
The enclosed Artic	les of Amendment an	nd fee are submitt	ed for filing.		
Please return all co	rrespondence concerr	ning this matter to	the following:		
_		DAVID F			
		Name of Con	act Person		
-		Firm/ Cor	mpany		<del></del>
_	395 BELLE AYRE DR				
	Address				
-	MT DORA, FL 32757  City/ State and Zip Code				
	E-mail address: (to	·	annual report notificati	ion)	
For further informa	tion concerning this r	matter, please call	l <b>:</b>		
	AVID FOUTS of Contact Person	at (_	352 )Area Code & Daytin	267-5 ne Telephor	
Enclosed is a check	for the following am	ount made payab	le to the Florida D	epartmer	at of State:
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Statu	ıs Cei	7.75 Filing Fee & ntified Copy ditional copy is enclos	sed)	\$52.50 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		Amer Divis Clifto 2661	t Address adment Section ion of Corporation on Building Executive Center ( hassee, FL 32301		

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

D & D VILLAGE CONSTRUCTION, INC	
(Name of Corporation as currently filed with the Florida Dep	t. of State)
P09000037948	
(Document Number of Corporation (if known)	

gnation "Corp," "Inc	The "company," or "incorporated" c," or "Co". A professional corporate the abbreviation "P.A."	
gnation "Corp," "Inc onal association," or lle:	"company," or "incorporated" c," or "Co". A professional corpo	or the
ered office address in	n Florida, enter the name of the	09 OCT -1 PM 3: 36
(Florida street a	eddress)	
(C:h.)	, Florida	_
	ered office address in d office address:	ered office address in Florida, enter the name of the d office address:  (Florida street address)

## 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
<u>D</u>	GEORGE WILLIAMS	395 BELLE AYRE DR MT DORA. FL 32757	
	ling or adding additional Articles, edditional sheets, if necessary). (Be s		
provisio	nendment provides for an exchange, ons for implementing the amendmen of applicable, indicate N/A)	reclassification, or cancellation of the second of the sec	of issued shares, ent itself:
		· · · · · · · · · · · · · · · · · · ·	
	w·		

The date of each amendmen	(s) adoption: 09/29/26	009
Effective date <u>if applicable</u> :		e of adoption is required)
	(no more than 90 days	after amendment file date)
Adoption of Amendment(s)	(CHECK (	<u>ONE</u> )
The amendment(s) was/we by the shareholders was/w		olders. The number of votes cast for the amendment(s) al.
		cholders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(	s) was/were sufficient for approval
by	(voting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
action was not required.		of directors without shareholder action and shareholder orators without shareholder action and shareholder
sele	a director, president or o	other officer – if directors or officers have not been – if in the hands of a receiver, trustee, or other court fiduciary)
		DAVID FOUTS
	(Typed or p	printed name of person signing)
		PRESIDENT
	(Title of persor	signing)