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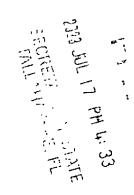
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| Special Instructions to Filing Officer: |
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Office Use Only



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## COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, F1, 32314

| NAME OF CORPOR           | RATION: South River Const                         | ruction Inc  |   |   |
|--------------------------|---|--|---|---|
| DOCUMENT NUMI            | BER:  |  |   |   |
| The enclosed Articles    | of Amendment and fee are su                       | ibmitted for filing.   |   |   |
| Please return all corres | spondence concerning this ma                      | atter to the following:  |   |   |
|                          | Eleimar Dias                                      |  |   |   |
|                          |   | Name of Contact Person   | n   |   |
|                          | South River Construction Inc                      |  |   |   |
|                          |   | Firm/ Company  | · · · · · · · · · · · · · · · · · · ·   |   |
|                          | 3840 NW 126 Avenue                                | , .  |   |   |
|                          |   | Address  |   |   |
|                          | Coral Springs FL 33065                            |  |   |   |
|                          |   | City/ State and Zip Cod  | e   |   |
|                          | edia1214@gmail.com                                |  |   |   |
|                          | E-mail address: (to be us                         | sed for future annual report                                       | notification)   |   |
| For further information  | n concerning this matter, plea                    | se call:   |   |   |
| Eleimar Dias             |   | 954<br>at (  | _) 275-0271   | 2023<br>S023                            |
| Name o                   | of Contact Person                                 | Area Co  | de & Daytime Telephone Number   | _ 3G                                    |
| Enclosed is a check for  | τ the following amount made                       | payable to the Florida Depa  | artment of State:   |   |
| ■ \$35 Filing Fee        | S43.75 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) | 2029 JUL 17 PK 4: 33 SECRETALL OF STATE |
| Ame                      | ling Address endment Section sion of Corporations | Amend  | Address Iment Section In of Corporations  |   |

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

South River Construction Inc.

| South River Construction life   |                               |
|---|-------------------------------|
| (Name of Corporation as currently filed with the Florida Dept. of State)  |                               |
|   |                               |
| (Document Number of Corporation (if known)  |                               |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follow its Articles of Incorporation:   | ing amendment(s) to           |
| A. If amending name, enter the new name of the corporation:   |                               |
|   | The new                       |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevia<br>"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must cont<br>"chartered," "professional association," or the abbreviation "P.A." | tion "Corp.,"<br>ain the word |
| B. Enter new principal office address, if applicable:   |                               |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   | <del></del>                   |
|   |                               |
|   |                               |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   |                               |
|   |                               |
|   |                               |
|   |                               |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:   | 21                            |
|   | SECTALLY I                    |
| Name of New Registered Agent  | - 27                          |
|   | _ ~:                          |
| (Florida street address)  | 7. 7. TU                      |
| New Registered Office Address:, Florida   | Code) L'O                     |
| (City) (Zig   | Code) ! ' O F.                |
|   | 一点                            |
| New Registered Agent's Signature, if changing Registered Agent:   |                               |
| I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position  |                               |
|   |                               |
|   |                               |
| Signature of New Registered Agent, if changing  |                               |
|   |                               |
| Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.   |                               |

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)

Example:

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.

| X_Change                      | PT           | John Doe     |                      |
|-------------------------------|--------------|--------------|----------------------|
| X Remove                      | <u>V</u>     | Mike Jones   |                      |
| X Add                         | <u>sv</u>    | Sally Smith  |                      |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>  | <u>Addres</u> s      |
| 1) Change                     | PST          | Eleimar Dias | 6895 NW 108 Avenue   |
| Add                           |              |              | Parkland FL 33076    |
| X Remove                      |              |              |                      |
| 2) Change                     | PST          | Enoque Dias  | 21810 NW 270 Street  |
| X Add                         |              |              | Okeechobee, FL 34972 |
| Remove Change                 | <del></del>  |              |                      |
| Add                           |              |              |                      |
| Remove                        |              |              | 2023 JUL 17          |
| 4) Change                     |              |              | - TC 2               |
| Add                           |              |              |                      |
| Remove                        |              |              |                      |
| 5) Change                     |              |              | Ph I 30              |
| Add                           |              |              |                      |
| Remove                        |              |              | <del></del>          |
| 6) Change                     |              |              |                      |
| Add                           |              |              |                      |
| Remove                        |              |              |                      |

| ttach additional sheets, if nec                      | essary). (Be spe | rcific)           |                 |  |               |  |
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| n amendment provides for ovisions for implementing t | an exchange, rec | lassification, or | cancellation of | issued shares,                               |               |  |
| (if not applicable, indicate                         | N/A)             | not contamed      | ii the amenume  | ent itseii:                                  |               |  |
|  |                  |                   |                 |  |               | 2023<br>EC                             |
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• • •

| 07/14/2023  |
|---|
| The date of each amendment(s) adoption:, if other than the date this document was signed.   |
| 07/14/2023<br>Effective date <u>if applicable</u> :   |
| (no more than 90 days after amendment file date)  |
| <b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.   |
| Adoption of Amendment(s) (CHECK ONE)  |
| ■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.   |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.  |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):  |
| "The number of votes cast for the amendment(s) was/were sufficient for approval   |
| by  |
| Dated  O7/4/2023  Signature  (By a director/president or other officer of directors or officers have not been selected by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiductary by that fiduciary)  Elcimar Dias  (Typed or printed name of person signing)  (Title of person signing) |
| PH 4: 33  |