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(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section

Division of Corporations		,
NAME OF CORPORATION: Troy Kir	by Construction Ir	<u>) </u>
DOCUMENT NUMBER: P 1000005	2732	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Troy Kirby	Sc., f Contact Person	
Troy Kirby C	Construction (Company	
4106 El Shaddia	r Sg	
Plant City Fl City/Sta	33565 te and Zip Code	
troy a) troy Kirby C E-mail address: (to be used for fi	onstruction • Com uture annual report notification)	
For further information concerning this matter, please	e call:	
Troy Kirby Sr. Name of Contact Person	at (<u>813</u>) <u>781- 5170</u> Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made p	ayable to the Florida Department of State	:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee &	of Status
Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

rently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation a amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: Name of New Registered Agent: New Registered Office Address: (Florida street 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 with and accept the obligations of the position.

Signature of 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)

Type of Action Title <u>Address</u> Name | ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add _____ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

The date of each amendment(s)	adoption: 8-23-11
Fifte-Alice data if a multi-alite.	(date of adoption is required)
Effective date if applicable: (no	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were as by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
The amendment(s) was/were apmust be separately provided for	pproved by the shareholders through voting groups. The following statement reach 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	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(vo	ting group)
action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 8-	24-11
Signature	Troy Kily Si
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Troy Kirby Sr. (Typed or printed name of person signing)
	(Typed or printed name of person signing)
•	President lowner. (Title of person signing)
	(Title of person signing)