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| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
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128-2-11

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: ABP Contractors and Consultants, corp |
|---|
| DOCUMENT NUMBER: |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Rusemane Bacallad, Esq. Name of Contact Person |
| Firm/ Company |
| 1550 madriga Rienve #310 |
| Conal Galles F1 33/46 City/ State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: Rushing Bacallau at (305) 858 7452 Name of Contact Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |
| ☐ \$43.75 Filing Fee |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |

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

| ABP Contractors and Consultants Comp |
|---|
| (Name of Corporation as currently filed with the Florida Dept. of State) |
| P/100000 4371 |
| (Document Number of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: |
| A. If amending name, enter the new name of the corporation: |
| ABP Ly Wactors one Consultants, Inc. The new name must be distinguishable and contain the word "corporation," "company," br "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: Kusemark Bacallae, 559. |
| New Registered Office Address: 150 Nadvaga Ave #310 (Florida street address) (Oval Gables, Florida 33/46 (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 amendi | ng the Officers and/or Directors, enund title, name, and address of each | ter the title and name of each | h officer/director being |
|-------------------|--|---------------------------------------|--------------------------|
| | ditional sheets, if necessary) | Officer and/or Director Beni | ig audeu. |
| <u>Title</u> | Name | Address | Type of Action |
| | | | |
| | | | ☐ Remove |
| | | | ☐ Add |
| | | | L Remove |
| | | | |
| | | | ☐ Remove |
| | | | |
| E. <u>If amen</u> | ding or adding additional Articles, | enter change(s) here: | |
| | additional sheets, if necessary). (Be | | |
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| F. If an a | mendment provides for an exchange | . reclassification, or cancella | ition of issued shares. |
| <u>provisi</u> | ons for implementing the amendme | nt if not contained in the am | endment itself: |
| (if r | not applicable, indicate N/A) | | |
| | | | <u>.</u> |
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| The date of each amendment | s) adoption: |
|---|---|
| · · | (date of adoption is required) |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/wer by the shareholders was/we | e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval. |
| | e approved by the shareholders through voting groups. The following statemer for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes c | ast for the amendment(s) was/were sufficient for approval |
| by | (voting group) |
| ı | (voting group) |
| The amendment(s) was/were action was not required. | e adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/were action was not required. | e adopted by the incorporators without shareholder action and shareholder |
| DatedSignature | 2/11/11 1/1/1/22 |
| (By a | director, president or other officer - if directors or officers have not been |
| selec | ted, by an incorporator —if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) |
| арро | inted fiduciary by that fiduciary) |
| | Kosemorie Barollae |
| | (Typed or printed name of person signing) |
| | Herney |
| | (Title of person signing) |