* P11000038008

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SEP 13 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	Nu-Way Construction Services,	Inc.	
	,		<u> </u>
DOCUMENT N	UMBER:	P11000038008	,
The enclosed Arti	cles of Amendment and	fee are submitted for filing.	
Please return all c	orrespondence concernin	g this matter to the following:	
		Carlos A. Alfaro	
	· .	Name of Contact Person	
	•		
		·	
•		Firm/ Company	
. ,		5307 SW 138 Place	
		Address	
		Miami, FL 33175	
		City/ State and Zip Code	
	E-mail address: (to be	ie8715@gmail.com e used for future annual report notification)	
For further inform	ation concerning this ma	tter, please call:	
	Carlos Alfaro	at (305) 321-6	331
Name	e of Contact Person	Area Code & Daytime Telephon	e Number
Enclosed is a chec	k for the following amou	nt made payable to the Florida Departmen	t of State:
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	52.50 Filing Fee Certificate of Status Certified Copy Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	01	, 1		
Nu-Way Constr	uction Services I	ncovacrated		
(Name of Corporation as curren				
P110	00038008 -		· · ·	•
	er of Corporation (if kno	own)	_	
			. 1	c n
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this F	ioriaa Projii Corpora	non adopts the	e following
A. If amending name, enter the new name of t	he corporation:	•	•	
, , , , , , , , , , , , , , , , , , ,			The	new .
abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe B. Enter new principal office address, if appli (Principal office address <u>MUST BE A STREET</u>	ssional association," or			ation
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)		EE. FLORIDA	M D
D. If amending the registered agent and/or reg new registered agent and/or the new register		n Florida, enter the n	ame of the	
Name of New Registered Agent:	<u> </u>			
New Registered Office Address:	(Florida street d	address)		•
_	(City)	, Florio (Zip Code)	ia	
New Registered Agent's Signature, if changing hereby accept the appointment as registered age		<u> </u>	ons of the posit	ion.

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>	Name	Address	Type of Action
VP	Carlos Alfaro	5307 SW 138 Place Miami, FL 33175	_ ☑ Add □ Remove
	· · · · · ·		_
			_
F. If amendi	ng or adding additional Articles, enter	change(s) here	- ,
	ditional sheets, if necessary). (Be specif		
			· .
	· ,		
•			
<u> </u>			
			• ,
			
provision	endment provides for an exchange, reclass for implementing the amendment if reclassicable, indicate N/A)	assification, or cancellation of iss not contained in the amendment	sued shares, itself:
7.5			· · · · · · · · · · · · · · · · · · ·
			
			
	<u></u>		

The date of each amendmen	t(s) adoption: 9	/9/11			
Effective date if applicable:	9/9/11	(date of ad	option is require	d)	
	(no more than	90 days after a	mendment file do	ate)	
Adoption of Amendment(s)	(C	HECK ONE)			
The amendment(s) was/we by the shareholders was/w			The number of	votes cast for the	ne amendment(s)
The amendment(s) was/we must be separately provide					
"The number of votes	cast for the ame	ndment(s) was/	were sufficient f	or approval	
by		•	,,,,,	÷	
	(voting group)				
The amendment(s) was/we action was not required. The amendment(s) was/we action was not required.				,	,
Dated_9/12	//11				
			fficer fif directo the hands of a re		
app	ointed fiduciary	•			
	(Ty		A. Alfaro	signing)	
		Soomote	m/Trocourer		
•	(Title	Secreta of person signin	ary/Treasurer		
	. (11110)	a person signii	1 <u>5.</u> /		