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SECRETARY OF STATE
TALLAHASSEE, FI OBIGA

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## **COVER LETTER**

TO: Amendment Section Division of Corpo			
. NAME OF CORPOR	ATION: GROUP 5	CONSTRUCTIO	N, INC.
	ER: P1000040046		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
		AVIV ABRAHAI	М
		Name of Contact Person	1
	GROUP	5 CONSTRUCT	ΓΙΟΝ, INC.
•		Firm/ Company	
	6101 W ATLANTIC BLVD., #203		
		Address	
	MARGATE, FL 33063		
		City/ State and Zip Cod	e
	av	/i.aviv@yahoo.c	om
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
AVIV	ABRAHAM	at (954	917-3882
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee	□\$43.75 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

**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

is enclosed)

## Articles of Amendment to Articles of Incorporation

## GROUP 5 CONSTRUCTION, INC.

	01			
GROUP !	5 CONSTRUC	TION, INC.		
(Name of Corporation as currently	filed with the Florida I	Dept. of State)	······································	
	P1000040046	6	į	20 11 20
(Document Number	of Corporation (if knows	n)	75.50	(ESE SE)
ursuant to the provisions of section 607.1006, Flor s Articles of Incorporation:	ida Statutes, this <i>Florida</i>	Profit Corporation ado	pts the following ame	POEC 26 1814 9:0,
If amending name, enter the new name of the	corporation:			· FLORIO
				new
ame must be distinguishable and contain the w Corp.," "Inc.," or Co.," or the designation "Co. ord "chartered," "professional association," or the Enter new principal office address, if applical	rp," "Inc," or "Co". A he abbreviation "P.A."	mpuny, or incorporati A professional corporati	on name must contai	in the
rincipal office address MUST BE A STREET Al		<del> </del>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u> </u>			
. If amending the registered agent and/or regis new registered agent and/or the new registered		Florida, enter the name	of the	
Name of New Registered Agent				
	(Florida street addr	ess)		
Non-Braiden IOM - Allows		ri		
New Registered Office Address:	(City)	, Florida	(Zip Code)	
	,		, ,	
ew Registered Agent's Signature, if changing R	egistered Agent:			
nereby accept the appointment as registered agent	. I am familiar with and	d accept the obligations	of the position.	
•				
Signature of	Now Registered Agent is	f 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)

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	V	AVIV ABRAHAM	6101 W ATLANTIC BLVD #203
Add			MARGATE, FL 33063
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			-
5) Change			
Add			
Remove			
			•
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
	•	
,	1 11 11 11 11 11 11 11 11 11 11 11 11 1	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	

The date of each an	nendment(s) adoption: December 19, 2012
Effective date if ap	Docombor 10, 2012
	(no more than 90 days after amendment file date)
	(CHECK OND)
Adoption of Amend	ment(s) (CHECK ONE)
	s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ers was/were sufficient for approval.
	s) was/were approved by the shareholders through voting groups. The following statement ly provided for each voting group entitled to vote separately on the amendment(s):
"The numb	er of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment( action was not re-	s) was/were adopted by the board of directors without shareholder action and shareholder quired.
☐ The amendment( action was not re	s) was/were adopted by the incorporators without shareholder action and shareholder quired.
Da	nted 12/19/2012
Si	gnatureMMh Dii
	(By a director, president or other officer – if directors or officers have not been
	selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	AVIV ABRAHAM
	(Typed or printed name of person signing)
	VICE-PRESIDENT
	(Title of person signing)