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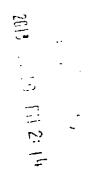
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: SOUTH END	CIVIL, INC.	
	MBER: P11000041100		
The enclosed Articl	es of Amendment and fee are	submitted for filing.	
	respondence concerning this i		
	Jacqueline Feliciano		
	Cotney Construction Law,	Name of Contact Pers	son
	3110 Cherry Palm Drive, S	Firm/ Company	
	Tampa, FL 33619	Address	
		City/ State and Zip Co	de
jfelio	ciano@cotneycl.com		
 ,.	E-mail address: (to be t	sed for future annual repor	t notification)
For further information	n concerning this matter, plea	se call:	
Jacqueline Feliciano		813	358-1746 ode & Daytime Telephone Number
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	US52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ante Divis P.O.	ing Address indiment Section ion of Corporations Box 6327 hassec, FL 32314	Amendi Division Clifton 2661 Ex	Address ment Section n of Corporations Building secutive Center Circle ssee, Fl. 32301

Articles of Amendment to Articles of Incorporation of

SOUTH END CIVIL, INC.	
(Name of Corporation a	s currently filed with the Florida Dept. of State)
P11000041100	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statists Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	ration:
	The new
name must be distinguishable and contain the word "corp.," "Inc.," or Co.," or the designation "Corp." "word "chartered," "professional association," or the abb	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the reviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u> </u>
	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(maning andress man property)	3
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	office address in Florida, enter the name of the ce address:
Name of New Registered Agent	
	(Florida street address)
	, Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe	ered Agent:
I hereby accept the appointment as registered agent. I an	m jamiliar with and accept the obligations of the position.
Signatu	re 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)

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 = ChiefExecutive 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 (Check One)	Title	Name	Address
1) X Change	P	MANCINI, MARTIN	5460 Southern Comfort Blvd
Add			Tampa, FL 33634
Remove			
2) Change	<u>P</u>	LAWRENCE, MIKKI	5460 Southern Comfort Blvd
Add			Tampa, FL 33634
X Remove			
3) Change			
Add			
Remove			
4) Change	·		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
an amendment provides for an excha provisions for implementing the amend (if not applicable, indicate N/A)	inge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:

The date of each amendment(s) adopt date this document was signed.	ion:	, if other than the
Effective date if applicable:		
Effective date it appricable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departs	c does not meet the applicable statutory filing requirements, this date with ment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	I by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the	he amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
■ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated 10-	7-19	
Signature		
(By a directe selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)	
Mar	tin Mancini	
	(Typed or printed name of person signing)	
Pres	sident	
	(Title of person signing)	