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Certified Copies	_ Certificates	s of Status
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BEATT TARY OF CARE

C.L. 15



# 371 Terrace Dr, Oviedo, FL 32765 Telephone 321-303-4400 Building Contractor CBC1254985 Construction Managers

April 23, 2015

Re: Name Change

To Whom It May Concern:

I began the process of changing the name of my corporation in wrong order. After being instructed from your office the correct process I have dissolved YORK CONSTRUCTION CFL, INC. and have NO INTENT of reinstating it. I wanted to change the existing name K M Diversified Construction, Inc. to <u>YORK</u> CONSTRUCTION CFL, INC.

If there is any further requirements in order for this change to occur please notify me by email or phone.

Thank you

Keith York President

Cell: 321-303-4400

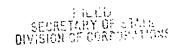
Keith@kmdiversified.com

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: K M Diversified Construction Inc				
DOCUMENT NUMBER: P110000414	401			
The enclosed Articles of Amendment and fee are sul	bmitted for filing.			
Please return all correspondence concerning this mat	tter to the following:			
KEITH YORK	KEITH YORK			
K M DIVERSIF	Name of Contact Person  K M DIVERSIFIED CONSTRUCTION INC			
Firm/ Company 371 TERRACE DR				
OVIEDO, FL 32765				
	City/ State and Zip Code			
KEYORK@GMAII	L.COM			
E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, please call:				
KEITH YORK	<sub>at (</sub> 321	, 303-4400		
Name of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301		

## **Articles of Amendment Articles of Incorporation**



15 APR 27 AH 8: 14

### K M DIVERSIFIED CONSTRUCTION INC

(Name of Corporation as currently filed with the Florida Dept. of State) P1100041401			

nt(s) to

(Document Number of Corpo	oration (if known)
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendm
A. If amending name, enter the new name of the corpora YORK CONSTRUCTION CFL	
	orporation," "company," or "incorporated" or the abbreviationc," or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable:	371 TERRACE DR
(Principal office address <u>MUST BE A STREET ADDRESS</u>	OVIEDO, FL 32765
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	371 TERRACE DR
	OVIEDO, FL 32765
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	N/A
	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	
Signature of New Reg	gistered 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 = 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.

X Change	PT John I	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u> .	<u>Jones</u>	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change			· · · · · · · · · · · · · · · · · · ·
Add		\	
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an amendment provid	es for an excha	nge, reclassific	ation, or cancel	lation of issued	shares.
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The date of each amendment(s) adoption:	FILED SECRITARY OF STATES	, if other than the
date this document was signed.	UIŢĪŠIDA DE CORPORTI IPIG.	,
Effective date if applicable:	15 APR 27 AM 8: 14	
	no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHEC	CK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for app	areholders. The number of votes cast for the amendment(sproval.	)
	hareholders through voting groups. The following stateme roup entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendr	nent(s) was/were sufficient for approval	
by	"	
(voting	g group)	
The amendment(s) was/were adopted by the bo action was not required.	ard of directors without shareholder action and shareholde	г
The amendment(s) was/were adopted by the incaction was not required.	corporators without shareholder action and shareholder	
Dated 04/23/2015 Signature	I III	
(By a director, preside	ent or other officer – if directors or officers have not been orator – if in the hands of a receiver, trustee, or other cour y that fiduciary)	t
KEITH YO	RK	
-	(Typed or printed name of person signing)	
PRESIDE	NT	
	(Title of person signing)	_