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POIS AIR OF CORPORATION

SEP 1 0 2016

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR.		NERAL CONTRACTOR,	INC		
DOCUMENT NUMB	P1100004	11473			
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	oondence concerning this ma	tter to the following:			
		DIEGO MONCAYO			
-		Name of Contact Perso	n		
-		Firm/ Company 5007 NW 67 AVENUE			
_	Address LAUDERHILL, FL 33319				
-	City/ State and Zip Code				
		GCBYOJ@GMAIL.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
DIEGO	MONCAYO	954 at (868-9383)		
Name of	Contact Person		ode & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	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 is enclosed)		
Mailing Address Amendment Section			Address Iment Section		
	ion of Corporations	Divisio	on of Corporations		
20	Rnv:6327	Cliftor	r Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATION

O. J. GENERAL CONTRACTOR, INC

(Name of Corporat	ion oc currently	filed with the li	Claride Dent of Ste		AH 9: 5
(Mank of Corporat	P11000041	473	101 ftia 19tpt. 01 Dia	<u> </u>	
·(Docur	ment Number of	Corporation (if k	:nown)		
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this I	Tlorida Profit Co	rporation adopts the	e following amen	dment(s) to
A. If amending name, enter the new name of the c	orporation:				
				The	
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	o," "Inc," or "C	Co". A professio			
B. <u>Enter new principal office address, if applicabl</u> (Principal office address <u>MUST BE A STREET AD</u>					
					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>) X</u>)				
					-
D. If amending the registered agent and/or registered new registered agent and/or the new registered			nter the name of th	<u>e</u>	
Name of New Registered Agent					
	(Flank)				
	-(Florida stre	ei aaaress)			
New Registered Office Address:		'City)	, Florid	a(Zip Code)	_
	`	- ··· · ·		ţ ,	
New Registered Agent's Signature, if changing Re			a akkaakam af tha		
I hereby accept the appointment as registered agent.	i am jaminar w	nın ana accepi in	e oougauons of the	position.	
Sign	nature of New Re	oistered Agent i	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.

<u>X</u> Change	. <u>PT</u> . <u>Jo</u>	<u>hn Doe</u>	
X Remove	<u>V</u> <u>M</u>	ike Jones	
_X Add	SV Sa	lly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	CEO	DIEGO MONCAYO	5007 NW 67 AVENUE
X Add			LAUDERHILL, FL 33319
Remove			
2) Change	VP ·	ONEIDA MORENO	14391 SW 24 STREET
Add.	***************************************		MIAMI, FL33175
X Remove			
3) Change			
Add			-
Remove			
4) Change		<u> </u>	
Add			
Remove			
5)Change			
Add			• • • • • • • • • • • • • • • • • • • •
Remove			
6) Change			
Add			
Remove			

ttac	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
	<u> </u>
rov	mendment provides for an exchange, reclassification, or cancellation of issued shares, ions for implementing the amendment if not contained in the amendment itself: Inot applicable, indicate N/A)
	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	lment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment(s)	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
·by"	
:(voting group)	_
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder.	NO 2
action was not required.	100 C
AUGUST 19, 2016 Dated	M 9: 50
Signature	
(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if a the hands of a receiver, trustee, or oth appointed fiduciary by that fiduciary)	r been er court
JULIO MORENO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	