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DIVISION OF CORPORATIO

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II AS -8 PM 1:56

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	E OF CORPORATION: Berge Building & Contracting Co.				
DOCUMENT N	UMBER:	P11000068123			
The enclosed Arti	cles of Amendment and fee	are submitted for filing.			
Please return all c	orrespondence concerning th	nis matter to the following:			
		Richard A. Berge			
		Name of Contact Person			
	Firm/ Company				
	8465 Grove Road				
		Address			
	Fort Myers, FL 33967 City/ State and Zip Code				
_	richard.bo	erge488@gmail.com ed for future annual report notification	on)		
For further inform	ation concerning this matter	, please call:			
	Richard A. Berge	at (239)	994-9797		
Name	e of Contact Person	Area Code & Daytime	e Telephone Number		
Enclosed is a chec	k for the following amount	made payable to the Florida De	epartment of State:		
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclose	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center C	2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Berge Buildi	ng & Contracting Co.	11 Aus -8 RM 1:56
(Name of Corporation as curr	ently filed with the Florida	Dant She State Com
	1000068123	ALLAHASSEE FLORIDA
·	mber of Corporation (if know	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	06, Florida Statutes, this <i>Flo</i>	rida Profit Corporation adopts the following
A. If amending name, enter the new name of	of the corporation:	
Berge Co	nstruction Company	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "Inc,	" or "Co". A professional corporation
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
D. If amending the registered agent and/or new registered agent and/or the new regi		Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street ad	dress)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered a	agent. I am familiar with an	
S	Signature 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			_
			П А.
(attach a	ding or adding additional Articles, endditional sheets, if necessary). (Be a		
N/À			
_			
<u>provisi</u>	mendment provides for an exchange ons for implementing the amendmen not applicable, indicate N/A)		
N/A		-	
			
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