

P11000102080

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

MAIL

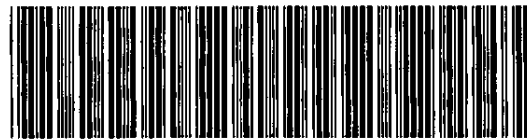
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Name Change
& Amend

03/07/14--01016--006 **35.00

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2014 MAR -7 PM 4:22
CLERK OF STATE
TALLAHASSEE, FLORIDA

DR
3/11/14

COVER LETTER

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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SOUTH FLORIDA CONSTRUCTIONS GROUP, INC

DOCUMENT NUMBER: P11000102080

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MADELINE ABREU

Name of Contact Person

KATTOURA & ASSOCIATES

Firm/ Company

2500 N MILITARY TRAIL SUITE 480

Address

BOCA RATON, FL 33431

City/ State and Zip Code

kattoura.accounting@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MADELINE ABREU

Name of Contact Person

at (954) 427-8040

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
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



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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 10, 2014

MADELINE ABREU
KATTOURA & ASSOCIATES
2500 N MILITARY TRAIL SUITE 480
BOCA RATON, FL 33431 US

SUBJECT: SOUTH FLORIDA CONSTRUCTIONS GROUP, INC.
Ref. Number: P11000102080

We have received your document for SOUTH FLORIDA CONSTRUCTIONS GROUP, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Carter
Regulatory Specialist

Letter Number: 314A00005157

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RETURNED CHECK

Articles of Amendment
to
Articles of Incorporation
of

SOUTH FLORIDA CONSTRUCTIONS GROUP, INC.

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

P11000102080

(Document Number of Corporation (if known))

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2014 MAR -7 PM 4:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

SOUTH FLORIDA CONSTRUCTION GROUP, INC

The new

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

N/A

(Florida street address)

New Registered Office Address:

(City)

, Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

N/A

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The date of each amendment(s) adoption: 02/28/2014
date this document was signed.

if other than the

Effective date if applicable: 02/28/2014

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement 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 action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 02/28/2014

Signature

Peter Kilosvary
(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)

PETER KILOSVARY

(Typed or printed name of person signing)

PD

(Title of person signing)