P/2000)479

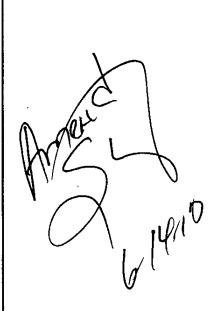
(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Na	me)
(Doc	ument Number)
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: VELEZ .	3 BROTHER	25 CONSTRUCTION - IMC.
	CR:		
	f Amendment and fee are su		
·	ondence concerning this ma	J	
rease return an corresp	ondence concerning this ma	tter to the following.	
_	BRYAU	VELEZ Name of Contact Perso	
ı	,	Name of Contact Perso	n
· 		Firm/ Company	
_	2143 N	34 TH 3 Address	STREET
	_	Address	
_	MIAHI	FL, 331	42. e
_		City/ State and Zip Cod	e
	Ve lez E-mail address: (to be us	3. constru	etuion & hotmail. com
For further information e	concerning this matter, pleas	se call:	
B L y Name of	AN VELEZ Contact Person	at (786 Area Co	
Enclosed is a check for t	the following amount made	navable to the Florida Dan	ortment of State:
Enclosed is a check for t	ine ronowing amount made	payable to the Plonda Dep	minent of State.
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
	ng Address		Address
	dment Section		Iment Section
	on of Corporations Box 6327		on of Corporations Building
	assee, FL 32314		Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

	of			The Contract of	
VELEZ 3 /3 (Name of Corporation as c	300THENS (CTION	1 TXC	
\					(e) 14.
	DOOOO 147 Number of Corporation (if k				**************************************
`	• •	•			The State of the S
rsuant to the provisions of section 607.10 Articles of Incorporation:	006, Florida Statutes, this <i>Fl</i>	orida Profit Corpora	tion adop	ts the following	amendmen
·					
If amending name, enter the new nam	ne of the corporation:				
me must be distinguishable and conta		" "			The new
Corp.," "Inc.," or Co.," or the designat	tion "Corp," "Inc," or "Co	o". A professional c			
rd "chartered," "professional association	on," or the abbreviation "P.	A. "			
Enter new principal office address, if				 	
rincipal office address <u>MUST BE A STI</u>	REET ADDRESS)				
Enter new mailing address, if applica (Mailing address MAY BE A POST Of					
(Mulling dutiess MAT DE ATOST OF	TTCL BOX				
•					
If amending the registered agent and		s in Florida, enter t	he name	of the	
new registered agent and/or the new		1		•	
Name of New Registered Agent	BRYAN	VELEZ			
_	2743 NW	345+			
	(Florida street	•		_	
New Registered Office Address:	MIAN	<i>11</i> , F	lorida	33/42	
	(City)			(Zip Code)	
ew Registered Agent's Signature, if cha	anging Registered Agent:				
ereby accept the appointment as register	red agent. I am familiar wit	h and accept the obli	gations o	f the position.	
					
Sign	dature of New Registered Ag	ent, 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.

Example: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add X Remove	<u>P</u>	JUAN JOSE OTERO LOPEZ	11120 SW 196 ST #B107 Higmi FL 33157 US
2) Change Add Remove	P	BRYAN VELEZ	2743 NW 345T Migmi FL 33142
3) Change Add Remove			
4) Change Add Remove		<u> </u>	
5) Change Add Remove			
6) Change Add Remove		·	

amending or adding additional Artic ttach additional sheets, if necessary).	(Be specific)
	•
•	
	•
if an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<u> </u>
jas orio	

The date of each amendment(s) adoption: 6.712
Effective date if applicable:	,
Energy date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	(voting group)
·	(voting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Dated	06/7/2012
Signature (By sele	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing) PRESIDENTE
	(Title of person signing)