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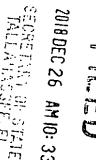


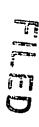
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COVER LETTER

TO: Amendment Section Division of Corporations

AME OF CORPORATION: Sackett Construction of SW FL Inc
OCUMENT NUMBER: P1200000 2305
he enclosed Articles of Amendment and fee are submitted for filing.
ease return all correspondence concerning this matter to the following:
David Sackett
Sacket Construction of SWFL Inc
POBOX10
Address
Bonita Springs FL 34133
City State and Zip Code
davide sackettplumbing. Com
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
tolly Kennington 11(239, 248-4716
Name of Contact Person Area Code & Daytime Telephone Number
nclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Set Setting Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Amendment Section Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

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FILED

P12000003305	SEOREWILLESSISTATE
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006 , Florida Statutes, this F its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: Sackett Construction Inc.	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "F	" "company," or "incorporated" or the abbreviation of the abbreviation of the abbreviation of the contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent 3089-A Ke (Plorida street New Registered Office Address: Fort Myers	nnesaw Street
New Registered Office Address: TOVT 11961	Florida Cip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.
Signature of New Re	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 <math>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: X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change			<u> </u>	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	<u> </u>			
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)		
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f an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or car adment if not contained in th	icellation of issued shares he amendment itself:	1
(if not applicable, indicate N/A)			
			

The date of each amendment(s) adoption: 12/17/18	, if other than the
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, this date will	
document's effective date on the Department of State's records.	
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 east 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 12 17 18	
Signature	
(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)	
David Sackett	
(Typed or printed name of person signing)	
President	
(Title of person signing)	