

PI2000009036

(Requestor's Name)

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☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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J. HORNE
SEP 15 2022

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2022 SEP 14 AM 9:36
SECRETARY OF STATE
TALLAHASSEE, FL

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2022 SEP 14 PM 3:58
RECEIVED
TALLAHASSEE, FL

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from Account: 120210000160 Amount: \$ 35.00

Authorization Signature: *James F. Kelly*
Wolfe Construction Group, Inc P12000009036

Business

Document #

Walk in _____ Pick up time _____

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_____ Photocopy

_____ **Certified Copy (s) of Articles**

_____ **Certificate of Status**

NEW FILINGS

_____ Profit
_____ Not for Profit
_____ Limited Liability
_____ Domestication
_____ Other
_____ **CORP**

AMMENDMENTS

X Amendment
_____ Resignation of R.A. Officer/Director
_____ Change of Registered Agent
_____ Dissolution/Withdrawal
_____ Merger
_____ **Conversion**
_____ Articles of Conversion

OTHER FILINGS

_____ Annual Report
_____ Fictitious Name
_____ **ARTICLES OF CORRECTION**

_____ APOSTIL() _____
Country

REGISTRATION/QUALIFICATIONS

_____ Foreign filing
_____ Limited Partnership
_____ Reinstatement

_____ Other

EXAMINER'S INITIALS: _____

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TALLAHASSEE, FL 32309
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EXAMINER'S INITIALS: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: WOLFE CONSTRUCTION GROUP, INC.

DOCUMENT NUMBER: P12000009036

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

Please return all correspondence concerning this matter to the following:

ROBERT WOLFE
Name of Contact Person
WOLFE CONSTRUCTION GROUP, INC.
Firm/ Company
1048 NE 44TH OAKLAND PARK, FL
Address
OAKLAND PARK, FL 33334
City/ State and Zip Code
RWOLFECONSTRUCTION@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT WOLFE at 954, 540-3530
Name of Contact Person Area Code & Daytime Telephone Number

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

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

WOLFE CONSTRUCTION GROUP, INC.

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

P12000009036

(Document Number of Corporation (if known))

FILED
2022 SEP 14 AM 9:36
SECRETARY OF STATE
TALLAHASSEE, FL

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:

NA

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)

NA

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

NA

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

NA

NA

(Florida street address)

New Registered Office Address:

NA

(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.

NA

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is are being filed pursuant to s. 607.0120 (11) (c), F.S.

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:

☒ Change PT John Doe
☐ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	OFFICER	ALAN WOLFE	1048 NE 44 STREET OAKLAND PARK, FL 33334
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	OFFICER	SAIMI WOLFE	1048 NE 44 STREET OAKLAND PARK, FL 33334
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove		NA	
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove		NA	
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove		NA	
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove		NA	

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

NA

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)

NA

The date of each amendment(s) adoption: 9/14/22, if other than the date this document was signed.

Effective date if applicable: 9/14/22
(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 not be listed as the 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 incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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 ROBERT WOLFE
(voting group)"

Dated 9/14/22

Signature: [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)

ROBERT WOLFE
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)