## P13000030351





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SECRETARY OF STATE



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: C&C Construc	tion Services Inc.	
DOCUMENT NUMI	BER: P12000030351		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Melissa Nycz		•
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Perso	n
	C & C Construction Se	ervices Inc.	•
		Firm/ Company	
	1439 Barn Owl Loop		
	1400 Dail OW Loop	Address	•
	Sanford, FL 32773		
•		City/ State and Zip Cod	C
	E mail addraws; tto be u	sed for future annual report	natification
	L-man address. (to be us	ed for future annual report	normeation)
For firther information	n concerning this matter, pleas	se call:	
	reoneering the matter, piear	· · · · · · · · · · · · · · · · · · ·	•
Melissa Nycz		<sub>at (</sub> 386	<sub>)</sub> 804-7573
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)
Ame Divi P.O.	ling Address Indiment Section Ission of Corporation's Box 6327 Ihassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

C&C Construction Services Inc.	,	
(Name of Corporation as currently filed with the	Florida Dept, of State)	
P12000030351		
(Document Number of Corporation (if known)		
irsuant to the provisions of section 607,1006, Florida Statutes, the Articles of Incorporation:	is Florida Profit Corporation adopts the follow	ving amendment(s
<u>'</u>	•	•
If amending name, enter the new name of the corporation:		•
		The new
mic must be distinguishable and contain the word "corporal Forp.," "Inc.," or Co.," or the designation "Corp." "Inc," or ord "chartered," "professional association," or the abbreviation	· "Co". A professional corporation name mu	
Enter new principal office address, if applicable:	2785 Fayson Circle	
rincipal office address MUST BE A STREET ADDRESS )	Deltona, FL 32738	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2785 Fayson Circle	. •
(Maning address Star DE A FOST OF FICE DOZ.)		
	Deltona, FL 32738	
If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the	
new registered agent and/or the new registered office addre		
Name of New Registered Agent		
Manie ty it is registered light		•
(Florida	street address)	
New Registered Office Address:	tr) , Florida , (Zin Code)	
17.19	in the state of th	
ew Registered Agent's Signature, if changing Registered Age wordy accept the appointment as registered agent. I am familia		TO NOW ST
	10 m	***********
. Signature of New Registere	d Agent, if changing	, au
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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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	<u>PT</u> <u>Jo</u>	hn Doe	•	
X Remove	<u>V</u> <u>M</u>	ike Jones		
<u>X</u> Add	<u>SV</u> <u>Sa</u>	Sally Smith		
Type of Action (Check One)	Title	Name :	<u>Addres</u> s	
1) Change	DPST	Melissa Nycz	1439 Barn Owl Loop	
Add			Sanford, FL 32773	
X Remove				
2) Change	DPST	James Clogston	2785 Fayson Circle	
XAdd		•	Deltona, FL 32738	
Remove				
3.) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change			• • • • • • • • • • • • • • • • • • • •	
Add		•		
Remove				
6) Change		•	· · ·	
6) Change				
Panyons				

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f an amendment provides fo	r an ovehange ri	neluscification or a	Sancollation of issue	d charne
provisions for implementing	g the amendment	if not contained in	the amendment its	self:
	te N/A)			
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The date of each amendment(s) ac	loption: 00/0/12
Effective date if applicable:	09/01/2
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
	roved by the shareholders through voting groups. The following statement 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 ado action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
selected	fector, president or other officer + i directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Melissa Nycz
<u>.</u>	(Typed or printed name of person signing)
	DP\$T
•	(Title of person signing)