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| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ac | ddress) | |
| (Ac | ddress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Вс | usiness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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S. HAWKES

AUG - 7812

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

| | OF S FLORIDA INC |
|--|--|
| | |
| omitted for filing. | |
| ter to the following: | |
| AGO | |
| Name of Contact Person | F S FLORIDA INC |
| Firm/ Company | |
| TREET | |
| Address | |
| | |
| City/ State and Zip Code | e |
| UCTIONINC@G | |
| e call: | |
| at (954 | 275-8579 |
| Area Co | de & Daytime Telephone Number |
| payable to the Florida Depa | artment of State: |
| □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Street Address | |
| | Iment Section on Corporations |
| | omitted for filing. ter to the following: AGO Name of Contact Person STRUCTION O Firm/ Company TREET Address CH, FL 33068 City/ State and Zip Code UCTIONINC@G ed for future annual report e call: _at (954 Area Contact Person at (954 Area Contact Person payable to the Florida Depayable to the Florida Depayable Certified Copy (Additional copy is enclosed) Street Amend |

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** of

12 AUC 20 AM 9. 45

RAIMBOW CONSTRUCTION OF S FLORIDA INC

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

P12000031589

(Document Number of Corporation (if known)

endment(s) to

| e must be distinguishable and contain the rp.," "Inc.," or Co.," or the designation "Cd "chartered," "professional association," or | | any," or "incorpor ofessional corporat | ated" or the al |
|---|---|---|-----------------|
| Enter new principal office address, if applic ncipal office address <u>MUST BE A STREET</u> | | · · · · · · · · · · · · · · · · · · · | |
| | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | E DOV) | | |
| | <u></u> | · | |
| | | | |
| | | rida, enter the nam | e of the |
| If amending thè registered agent and/or reg | ristered office address in Floi | rida, enter the nam | e of the |
| If amending the registered agent and/or reg | ristered office address in Floi | | e of the |
| If amending the registered agent and/or reg new registered agent and/or the new registe | gistered office address in Flor ered office address: | | e of the |
| If amending the registered agent and/or reg new registered agent and/or the new registe | zistered office address in Flor ered office address: | | e of the |

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 officer

| held. President, Treasur Changes should be note a change, Mike Jones le Mike Jones, V as Remov | er, Director wou d in the following aves the corpord | ıld be PTD. g manner. Currently John Doe is listed as th ation, Sally Smith is named the V and S. The: | re than one title, list the first letter of each office he PST and Mike Jones is listed as the V. There is, se should be noted as John Doe PT as a Change, |
|---|--|---|--|
| Example: X Change | PT John | Doe | Section 19 |
| X Remove | <u>V</u> <u>Mika</u> | e Jones | Salita is |
| X Add | SV Sally | <u>/ Smith</u> | 7⁄ |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change | <u>VP</u> | MARTHA E AMAYA | 421 SW DAUPHIN AVE |
| X_Add | | | PORT ST LUCIE, FL 34953 |
| Remove | | | |
| 2) Change | VP_ | NICOLAS AMAYA | 6610 SW 17TH STREET |
| Add | | | POMPANO BEACH, FL 33068 |
| X Remove | | | |
| 3) Change | | WILFREDO AMAYA | 6270 SW 20TH STREET |
| Add | | | POMPANO BEACH, FL 33068 |
| X Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| Attach additional sheets, if necessary). (Be specific) | |
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| 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) | |
| /A | |
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| The date of each amendmen | t(s) adoption: 08/01/2012 | _ |
|--|--|---|
| Effective date if applicable: | 08/01/2012 من الم | 4 |
| | (no more than 90 days after amendment file date) | Laws of the state |
| Adoption of Amendment(s) | (CHECK ONE) | 14 14 TO |
| | ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval. | TOWN TO |
| | ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s): | . F |
| "The number of vote | s cast for the amendment(s) was/were sufficient for approval | |
| by | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | (voting group) | |
| ☐ The amendment(s) was/we action was not required. | ere adopted by the board of directors without shareholder action and shareholder | |
| ☐ The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder | |
| Dated_08 | /01/2012 | |
| Signature_ | lason H Santiago | _ |
| | 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) | |
| | JASON H SANTIAGO | |
| | (Typed or printed name of person signing) | _ |
| | PRESIDENT | |
| | (Title of nercon signing) | |