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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ATLANTIS CON	STRUCTION OF NAPLES	S DRYWALL DIVISION INC
DOCUMENT NUM	BER: P12000045862		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	ntter to the following:	
	JACINTO LANDAVERDE		
	-	Name of Contact Perso	n
	ATLANTIS CONSTRUCTI	ON OF NAPLES DRYWA	LL DIVISION INC
		Firm/ Company	
	2561 WHITE BLVD		
		Address	
	NAPLES FL 34117		
		City/ State and Zip Cod	e
atlan	isconstruction64@gmail.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further informatio	n concerning this matter, plea.		289-6729
Name of Contact Person		at (de & Daytime Telephone Number
	or the following amount made		,
S35 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)
Ami Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, F1, 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, F1, 32301

Articles of Amendment to Articles of Incorporation of

ATLANTIS CONSTRUCTION OF NAPLES DRYWALL DIVISION INC

	ly filed with the Florida Dept. of State)
P12000045862	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ' word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	<u> </u>
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address. 	
	<u>::</u>
Name of New Registered Agent	
(Florida str	vet address)
New Registered Office Address;	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent.—I am familiar (<u>:</u> with and accept the obligations of the position.
Signature of New k	Projectored 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 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	PT	John Doe	
X Remove	\underline{V}	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	1	JUAN J. LOPEZ	3460 19TH AVE SW
X Add	•	_	NAPLES FL 34117
Remove			
2) Change	VP	BRENDA LANDAVERDE	2561 WHITE BLVD
XAdd			NAPLES FL 34117
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	rticles, enter change(s) here: (). (Be specific)
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	<u> </u>
If an amendment provides for an ex-	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

	6/1/2018
The date of each amendment(s)	adoption:, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	1/2018
Effective date in appricable.	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) 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):
	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder
6/1/2018 Dated	
Signature	Ba
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that tiduciary)
	JACINTO LANDAVERDE
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing).

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