

PI2000056413

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

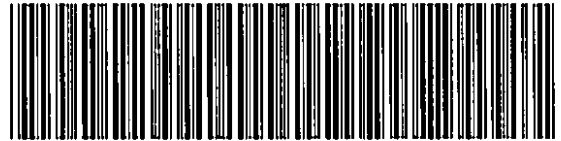
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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AUG 15 2018

FILED
2018 AUG 14 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FL

JOHN R. SAMAAN, P.A.

ATTORNEY AT LAW

WWW.SAMAAN-LAW.COM JRS@SAMAAN-LAW.COM

ORANGE COUNTY
337 N. FERN CREEK AVENUE
ORLANDO, FLORIDA 32803
407.740.0500 - 407.893.8151 FAX

SEMINOLE COUNTY
1220 COMMERCE PARK DR., STE. 207
LONGWOOD, FLORIDA 32779
407.740.0500 - 407.893.8151 FAX

August 9, 2018

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

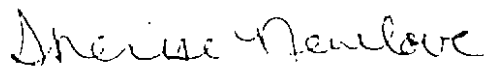
Re: Dexaco Masonry, Inc. (*Document No.: P12000056443*)

Dear Sir or Madam,

Our firm represents Dexaco Masonry, Inc. in regard to the enclosed Articles of Amendment. Enclosed please find the Cover Letter along with the Articles of Amendment to Articles of Incorporation of Dexaco Masonry, Inc. Also enclosed is check number 2327 in the amount of \$43.75 for the filing fee and Certified Copy.

In the event you require additional information, please contact me at (407) 740-0500. I thank you in advance for your attention to this matter.

Sincerely,



Sherise Newlove
Paralegal

Encls.

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Dexaco Masonry, Inc.

DOCUMENT NUMBER: P12000056443

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

Please return all correspondence concerning this matter to the following:

Wisam Emachah

Name of Contact Person

Dexaco Masonry, Inc.

Firm/ Company

5449 S. Semoran Blvd, Suite 225

Address

Orlando, Florida 32822

City/ State and Zip Code

sam@awhomeimprovements.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wisam Emachah at 407 989-6704
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 type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

Articles of Amendment
to
Articles of Incorporation
of

2018 AUG 14 AM 11:18

Dexaco Masonry, Inc.

SECRETARY OF STATE
TALLAHASSEE, FL

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

P12000056443

(Document Number of Corporation (if known))

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:

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)

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

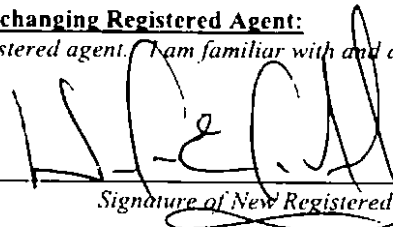
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Wisam Emachah
5449 S. Semoran Blvd, Suite 225
(Florida street address)

New Registered Office Address: Orlando, Florida 32822
(City) (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.



Signature of New Registered 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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	VP,D	John Dexter	5456 Patricia Drive
<input type="checkbox"/> Add			Orlando, Florida 32822
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	P, D	Wisam Emachah	5449 S. Semoran Blvd, Ste 225
<input checked="" type="checkbox"/> Add			Orlando, Florida 32822
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

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)

N/A

August 9, 2018

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

August 9, 2018

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 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 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 _____,"
(voting group)

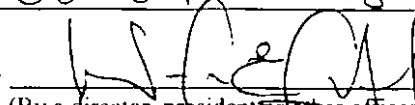
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated

08-09-2018

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)

Wisam Emachah

(Typed or printed name of person signing)

President

(Title of person signing)