P130000002175

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SECKETARY OF STATE TALLAHASSEE, FLORIDA

3 SEP 30 PM 3: 3

C. LEWIS
OCT 7 2013
EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Felix Construction Corp. DOCUMENT NUMBER: P13000002175
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Felix Frias Name of Contact Person
Firm/ Company 4768 A CAPPERE Trail Address
West Pain Beach, FL. 33415 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Felix Frias at (978) 6010590 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:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

	Articles of incorporation	Anna days
- L d	of	13 SEP 30 PM 3: 37
Felix Cons	truction Com	
(Name of Corporation as curr	ently filed with the Florida Dept. of Sta	te) TALLAHASSA OF STATE
P130	100002175	SECRETARY OF STATE TALLAHASSEE, FLORIDA
(Document Nur	nber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corp	poration adopts the following amendment(s
A. If amending name, enter the new name o	f the corporation:	
		The new
name must be distinguishable and contain t "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co". A profession	"incorporated" or the abbreviation
B. Enter new principal office address, if app	Nicable: 4768/	+ CAREFIRE Trail
(Principal office address MUST BE A STREE	ET ADDRESS)	1 CAREFREE Trail Palm BEACH, FC- 33415
	West P	almi Dotah PC
		CIPE C
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
O. If amending the registered agent and/or new registered agent and/or the new registered Agent Name of New Registered Agent		er the name of the
	(Florida street address)	· · · · · · · · · · · · · · · · · · ·
New Paristrus J.Offins Address		Planida
New Registered Office Address:	(City)	_, Florida (Zip Code)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered to	agent. I am familiar with and accept the	obligations of the position.
Signatu	re 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: X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u> Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	Flavio Fabian.	2420 Wiley Ct.
Add Remove			HUNYWOOD, FL 33020.
2) Change Add	OFF	Mario Fernando Rosario Silverio.	4768A CAREFREE Trail West Palm Beach, FL. 33415
Remove 3) Change Add Remove	<u>VP</u>	Martires Dotel Sena	4768 A CAREFIEE Trai West Palm Beach, FL. 33415
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

)

(<u>1</u>	f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)
<u>I</u>	f 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)

The date of each amendment(s) adoption	on:			if other than	
date this document was signed.	alic	12012	12.0-		
Effective date <u>if applicable</u> :	(no more than 90 da	ys after amendmer	ISSEP 30 IN SIGNETARY ALLAHASSEE	<u>FM 3</u> : 37 UF STATE • FLORIDA	
Adoption of Amendment(s)	(CHECK ONE)				
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		nber of votes cast	for the amendment(s)		
☐ The amendment(s) was/were approved must be separately provided for each				t	
"The number of votes cast for th	e amendment(s) was/were su	fficient for approve	al		
by	(voting group)		.,,		
☐ The amendment(s) was/were adopted action was not required.	by the board of directors with	out shareholder ac	ction and shareholder		
The amendment(s) was/were adopted action was not required.	by the incorporators without	shareholder action	and shareholder		
Dated 9-18-	13.				
Signature Fel	il Com				
(By a directo	r, president or other officer –				
	an incorporator — if in the har luciary by that fiduciary)	ids of a receiver, to	rustee, or other court		
****	FCC: X (Typed or printe	アントラ			
	(Typed or printe	ed name of person	signing)		
	Cla	< Con			
	(Title of	f person signing)		··· —	

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