P13000014652

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(0.1), 0.10.02.1, 10.10.1,
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ECRETARY OF STATE

A. BUTLER

JUL 15 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: KAHN CONSTRU	CTION CORP				
DOCUMENT NUME	ER: P13000014652	··				
	of Amendment and fee are sul	bmitted for filing.				
Please return all corres	pondence concerning this mat	iter to the following:				
	ROBERT P KAHN					
•		Name of Contact Person	l			
	KAHN CONSTRUCTION CORP					
	Firm/ Company					
	6822 SUGARLOAF KEY ST	• •				
-		Address				
	LAKE WORTH, FLORIDA 33467					
	City/ State and Zip Code					
	RKAHN@KAHNCONSTRU	CTION.NET				
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	concerning this matter, pleas	888	645-6445			
Name o	f Contact Person	at (Area Coo	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made p					
☐ \$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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303			

Articles of Amendment Articles of Incorporation of

FIL.ED

2022 HAY 12 A

KAHN CONSTRUCTION CORP	2022 MAT 13 AM 7: 07
(Name of Corporation as curren	tly filed with the Florida Dept: of State)
P13000014652	TALLARASSEE, FI
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
Fator new aging including address if applicable.	N/A
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
,	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
If amending the registered agent and/or registered office ad-	dracs in Florida antar the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent N/A	
пате од неж педімегей жует	
· · · · ·	
	treet address)
New Registered Office Address: N/A	Florida
	(City) (Zip Code)
lew Registered Agent's Signature, if changing Registered Agen	**
hereby accept the appointment as registered agent. I am familiar	
Signature of New	Registered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John D	<u>oe</u>		
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	<u>Şally S</u>	<u>mith</u>		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s	
1) Change	V		MAURICE R.DELGADO	6822 SUGARLOAF KEY STREET	
X Add				LAKE WORTH, FLORIDA 33467	
Remove					
2) Change		_		 	
Add					
Remove Change		_		· · · · · · · · · · · · · · · · · · ·	
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_			
Add					
P emove					

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·
	
	· · · · · · · · · · · · · · · · · · ·
1 an amendment provides for an exclusions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument it not contained in the amendment usen.
·	
 	

• , •

	MAY 6,2022	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
	MAY 6TH, 2022	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date e Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action	and shareholder
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) re 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):	ı
"The number of votes	east for the amendment(s) was/were sufficient for approval	
4		
by	(voting group)	
MAY 6 Dated	Tapa P DL	
(By	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court of interior	
	ROBERT P. KAHN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	