P13000022136

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SOUTHWEST	Masonary Con	suitants inc		
DOCUMENT NUM	BER: P1300002273	36			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Alexandra Sanchez				
	Name of Contact Person				
	Southwes	+ Masonan	y Consultants anc		
	104 Andros St.				
		Address			
	Lehigh Acres, Fl				
		City/ State and Zip Cod	le		
dit	tojavi@gmail.com	1			
	E-mail address: (to be u	sed for future annual report	notification)		
For further information Alexandra S	on concerning this matter, pleas	se call: at (239	. 288-1677		
Name of Contact Person			ode & Daytime Telephone Number		
	or the following amount made		•		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Ameno Divisio Clifton	Address dment Section on of Corporations n Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

Southwest Masonary Consultants, Inc.	Florida Dept. of State)
(Name of Corporation as currently filed with the	Florida Dept. of State)
P13000022736	
(Document Number of Corporation ((if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporation:	
1)/Q	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	-NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	104 Andros St
	Lehigh Acres, FI 33936
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent //	-
(Florida e	treet address)
(Pioriau Si	reei uuuress)
New Registered Office Address: (City	, Florida
New Registered Agent's Signature, if changing Registered Agent	t •
I hereby accept the appointment as registered agent. I am familiar	
- $1/n$	
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: X_Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	D	Alexandra Sanchez	104 Andros St.	
✓ Add			Lehigh Acres, FI 33936	
Remove				
2) Change	Р	Maria G. Vicente	3514 23rd St SW	
Add			Lehigh Acres, Fl 33976	
Remove				
3) Change			<u> </u>	
Add				
Remove				
4) Change			_	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Artic (Attach additional sheets, if necessary).	
	N)/A
	1017
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· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
	4/10.
	NA

The date of each amendment(s) adoption: November 6, 2014 date this document was signed.	, if other than the			
Effective date if applicable: November 6, 2014				
(no more than 90 days after amendment file date)				
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)				
(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 November 6, 2014				
Signature Ma Greadelys				
(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)				
Maria G. Vicente				
(Typed or printed name of person signing)				
Pres.				
(Title of person signing)				