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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DISTRITO CONT	RACTOR, INC.	
	ER:		
The enclosed Articles o	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
,	APARICIO RODRIGUEZ-0	CRUZ	
-		Name of Contact Person	1
	DISTRITO CONTRACTOR	R, INC.	
-		Firm/ Company	
	451 SE 8 STREET #119		
-		Address	
1	HOMESTEAD, FL 33030		
-		City/ State and Zip Code	
DISTE	RITOCONTRACTOR119@	GMAIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information APARICIO RODRIG	concerning this matter, pleas UEZ-CRUZ	se call: 786	ູ 3796515
Name of Contact Person		at (Area Co-	de & Daytime Telephone Number
	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)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assec. FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

DISTRITO CONTRACTOR, INC.	2018 AUG 115 🖘 20 150-
(Name of Corporation	as currently filed with the Florida Dept. of State)
P13000036415	SEURI TARY OF STATE
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</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	
new registered agent and/or the new registered of	fice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	
I hereby accept the appointment as registered agent. I a	am familiar with and accept the obligations of the position.
Siynatı	ure 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 Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>neş</u>	
_X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	V		MIRIAM GARCIA	17247 NW 72ND PL
X Add	•	_		MIAMI, FL. 33015
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add		_		
Remove				
4) Change				
Add			_	
Remove				
5) Change				
Add		_		
Remove				
6) Change			· · · · · · · · · · · · · · · · · · ·	-
Add				****
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
-	
	<u></u>
13001-1	
- 	
٠.	
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s	s) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date very Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/wer-	adopted by the shareholders. The number of votes cast for the amendment(s) e 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):	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
07/189	/2018/	
Dated Signatur	Redselle	
WE.	Afterector, president or other officer - if directors or officers have not been cled, by an incorporator - if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	APARICIO RODRIGUEZ-CRUZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	