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19 AUG 28 PH 12: 38
SECRETARY OF STATE

C. LEWIS

SEP 6 "013

EXAMINER

## **COVER LETTER**

Division of Corporations 15 General Construction Inc **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 1 HAMACION SOYUNES A ANOCINE INC Firm/Company
Sensor/ Blud
Address
WEAROLO GL 3253 Bas T FINANCIO Sorvica. Com For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

**Mailing Address** 

TO: Amendment Section

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

## **Articles of Amendment**

to

•	Articles of Incorporation	FILED
D 456	of Carchine	Tr 13-AUG 28 PH 12: 33
O GENJU	Par Clade Ale Placide Part of State	108 28 PH 12: 33
	ently filed with the Florida Dept. of State	TALL MILARY OF COLO
P 3 6000 SYS.	<del></del>	SEGRETARY OF STATE TALLAHASSEE, FLORIDA
(Document Nur	nber of Corporation (if known)	жи
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corpor	ration adopts the following amendment(s) to
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 professional	"incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address, if app	olicable:	
(Principal office address <u>MUST BE A STREI</u>	<u>ET ADDRESS</u> )	
	<del></del> -	
C. Enter new mailing address, if applicable		
(Mailing address MAY BE A POST OFF)		
		<del> </del>
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 reg	istered office address:	
Name of New Registered Agent	# 1 WAS 1888	
_	(Florida street address)	<del></del>
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		bligations of the position
i nereby accept the appointment as registered	адет і ат јатинаг жип апа ассері іпе о	ongunons 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: X Change	PT John I	<u>Doe</u>	
X Remove	V Mike	<u>Jones</u>	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	CFO	ANICETO Soto	8372 CArdeNILL CIV Pensaul 71 32531
Add			Rensmil 71 32534
Remove			<del></del>
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ttach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
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If an amendment provides for an exchaprovisions for implementing the ame	ndment if not contained in the amendment itse	<u>if:</u>
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The date of each amendment(s) adoption: _	8/24/2013	if other than the
date this document was signed.		TLED
Effective date if applicable:	8/24/2013	13 AUG 28 PM 12: 38
	(no more than 90 days after amendment file date)	Strength
		SECRETARY OF STAPE PABLAHASSFE. FLORIDA
Adoption of Amendment(s) (C	HECK ONE)	L. P. GRIBA
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amen approval.	dment(s)
	he shareholders through voting groups. The following group entitled to vote separately on the amendment	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by	,"	
(ve	oting group)	
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and sha	areholder
action was not required.	e incorporators without shareholder action and shareholder	older
Dated S/24/ Signature San und	2013	
Signature Samuel	Safe	
(By a director, pre	sident or other officer - if directors or officers have n	ot been
	corporator – if in the hands of a receiver, trustee, or ot	her court
• •	ry by that fiduciary)	
•	5 moul 50 to	
	(Typed or printed name of person signing)	
	1/ P	
	(Title of person signing)	