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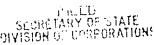
TO: Amendment Section Division of Corpora				
NAME OF CORPORA	TION: RUBEN	GIVEVARA CON	STRUCTION INC.	
DOCUMENT NUMBE	R: P130000	92700		
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.		
Please return all correspondent	ondence concerning this mat	ter to the following:		
	Ru	IBEN GUEVA	20	
		Name of Contact Person	ח	
_	Ruben	GUEVARA (DNSTRUCTION INC.	
	1100	• • • • • • • • • • • • • • • • • • • •		
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	<u> PALM</u>	SPRINGS 1	7L. 33406	
City/ State and Zip Code				
	Rusen E-mail address: (to be us	GUEUARA 25 sed for future annual report	Camarl. Com	
			,	
For further information (concerning this matter, pleas	se call:		
0	-			
LU27	N GUEVARA	at (501	1602-4307	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for t	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)	
Maili	ng Address	Street	Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation



	of	DIAISIDH OU CUREORYLIDAG
RUBEN GUEVA		1 INMOUNT 16 PM 2: 49
	ntly filed with the Florida Dept. of St	
0130009	3940	
(Document Numb	3760 her of Corporation (if known)	·
Pursuant to the provisions of section 607.1006, Fits Articles of Incorporation:	Florida Statutes, this <i>Florida Profit Con</i>	poration adopts the following amendment(s)
A. If amending name, enter the new name of	the corporation:/	
	$\Lambda I/A$	The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation 'word "chartered," "professional association," o	'Corp," "Inc," or "Co". A professio	r "incorporated" or the abbreviation
B. <u>Enter new principal office address, if appli</u> (Principal office address <u>MUST BE A STREET</u>		1/4
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFIC</u>	<u>FE BOX</u>)	114
D. If amending the registered agent and/or renew registered agent and/or the new registered		ter the name of the
Name of New Registered Agent	N/A	- A
New Registered Office Address:	(Florida street address)	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag		obligations of the position
тистему ассерь те арронитет из техниетей ад	zem. 1 um jammar win and accept the	conganous of the position.
	N/ H	
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>	<u>Na</u>	<u>me</u>	Address
1) Change		<u></u>	KELVINI. I. CASTILLO	345 LAURTE ED WEST PALM BCH
Add				WEST PALMI BCH
Remove				F.L. 33405,
2) Change	************			
Add				· · · · · · · · · · · · · · · · · · ·
Remove				
3) Change				
Add				
Remove				
4) Change	<u></u>	·		
Add				
Remove				
5) Change				
Add				
Remove				
 1				
6) L Change				
Add				
Remove				

auach <i>additional sheets, i</i> j	lditional Articles, f necessary). (Be	e specific)	cts/ nere.			
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f an amendment provide provisions for implemen (if not applicable, ind	ting the amendm	e, reclassifica	ition, or canc ntained in the	amendment	ued shares, itself:	
			.	· · · <u>· · · · · · · · · · · · · · · · </u>		
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	//	/ A				
	//	/A				
	Λ/,	/ A				
	Λ/,	/ A				

The date of each amendment(s) adoption: date this document was signed. Effective date if applicable:	ASECRETARY OF STATE AVISION OF HORFORATIONS 14 JUN 16 PM 2:50	, if other than the
(no more	than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE		
The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	rs. The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the sharehold must be separately provided for each voting group entities.		
"The number of votes cast for the amendment(s) v	was/were sufficient for approval	
by	"	
by	 	
The amendment(s) was/were adopted by the board of diaction was not required.	rectors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporate action was not required.		
Dated 6/13/201	4	
Signature	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(By a director, president or oth	ner officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court duciary)	_
2	UBER - A. GUEVARA	
(Туј	ped or printed name of person signing)	
 	PRESTDENT	
	(Title of person signing)	