# P1400061774

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FILING CANCELLED RETURNED CHECK

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

AUG 13 2015

#### **COVER LETTER**

NAME OF CORPORATION: Begy Brackett Construction INC.

DOCUMENT NUMBER: P1400061774

The enclosed Articles of Amendment and fee are submitted for filing.

Begy Brackett

Name of Contact Person

Begy Brackett Construction INC.

Firm/ Company

5797 Agrow CT

Address

SAN ASOTA FC 39232

SUDDENDES THINE TOLD 901. COM
E-mail address: (to be used for further annual report notification)

For further information concerning this matter, please call:

Please return all correspondence concerning this matter to the following:

TO: Amendment Section

Beau Brackett at (941) 780 0619

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee Certificate of Status

Certificate of Status

Certified Copy (Additional copy is enclosed)

Certified Copy (Additional Copy is enclosed)

Mailing Address
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

## FILING CANCELLED RETURNED CHECK

Articles of Amendment

to
Articles of Incorporation

Bean Bracks	_		/ (	
(Name of Corporation as currently filed with the F		7.0		
100006	1774			
(Document Number of Corporation (i				
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopt	s the following	amendment(s)	to
A. If amending name, enter the new name of the corporations				
<i>N/H</i>	<del>-</del>		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	'Co". A professional corporation	ed" or the abl name must co	reviation ontain the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	V/A			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA			
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  Name of New Registered Agent		f the	14 AUG SECREI TALLAH!	******
New Registered Office Address: (City)	reet address), Florida	(Zip Code)	G-I PM 3: 49 TARY OF STATE BASSEE, FLORID	FILED
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of	the position.	A	
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 De	oe				
X Remove	<u>v</u>	Mike Jo	_	FILING CANCELLED			
A Remove	<u>*</u>	WILKE JO	711 <u>62</u>			RNED CHECK	
X Add	<u>SV</u>	Sally Si	<u>mith</u>		KETU	KNED CHECK	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			<u>Addres</u> s	
1) Change	VP	_	James	Brian	CARBO	onell 3715 WALNU	T AVE
Add						5ANASOTA FL 34234	
Remove						34234	
2) Change		_			<u> </u>		
Add							
Remove							
3) Change		<u> </u>					
Add Remove							
Remove							
4) Change		_			· · · · · · · · · · · · · · · · · · ·		
Add							
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5) Change		<del></del>					
Add							
Remove							
6) Change		_			<del></del>		
Add							
Remove							

## FILING CANCELLED RETURNED CHECK

an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate N/A)	
an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for Implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
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N/p	
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### FILING CANCELLED RETURNED CHECK

The date of each amendment(s) add	option: 7/29/14	, if other than the
date this document was signed.	7/2/1	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adop action was not required.	eted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adop action was not required.	eted by the incorporators without shareholder action and shareholder	
Dated 7/29	/14	
Signature	ear Brock to	
selected,	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary)	
_	Beau Brackett (Typed of printed name of person signing)	
	Bean Brackett (Typed or printed name of person signing) President	
***	(Title of person signing)	