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COVER LETTER

TO: Amendment Section

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Division of Corporations

NAME OF CORPORATION: _ SEAHAWK CONSTRUCTION, INC.

DOCUMENT NUMBER: P14000084334

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

Please return all correspondence concerning this matter to the following:

JONATHAN E. GOZZO

Name of Contact Person

SEAHAWK CONSTRUCTION, INC.

Firm/ Company

190 SPYGLASS LANE

Address

JUPITER, FL 33477

City/ State and Zip Code

jonnygozzo08@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (561) Area Code & Daytime Telephone Number JONATHAN E. GOZZO

Name of Contact Person

□\$52.50 Filing Fee

Certificate of Status Certified Copy

(Additional Copy

is enclosed)

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

📕 \$35 Filing Fee

□S43.75 Filing Fee & Certificate of Status

□\$43.75 Filing Fee & 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

Articles of Amendment
to
Articles of Incorporation
of

SEAHAWK CONSTRUCTION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

17

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P14000084334

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	ation "Corp," "Inc."	" or "Co". A professional c	icorporated" or the abbreviation orporation name must contain the
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>)		N/A	
C. <u>Enter new mailing address, if appli</u> (Mailing address <u>MAY BE A POST (</u>		N/A	
D. <u>If amending the registered agent an</u> new registered agen <u>t</u> and/or the new			ie name of the
Name of New Registered Agent	N/A		
	(Flor	rida street address)	
<u>New Registered Office Address</u> :	N/A	(City)	, Florida (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations 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: V / 1

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<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	V	GREGORY L GOZZO	190 SPYGLASS LANE
X Add			JUPITER, FL 33477
Remove			
2) Change			
Add			
Remove			
3) Chaoge			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:

. ____.

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(Attach additional sheets, if necessary). (Be specific)

_ _ _ .

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N/A

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F. If 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)

.....

N/A

	nent(s) adoption:	, if other the
date this document was s	gned.	
Effective date <u>if applica</u>	ble:	
Note: If the date inserte document's effective date	d in this block does not meet the applicable statutory filing requirements, this date wi on the Department of State's records.	I not be listed :
Adoption of Amendmer	t(s) (<u>CHECK ONE</u>)	
	s/were adopted by the shareholders. The number of votes cast for the amendment(s) as/were sufficient for approval.	
□ The amendment(s) wa must be separately p	s/were approved by the shareholders through voting groups. The following statement ovided for each voting group entitled to vote separately on the amendment(s):	
	votes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) w action was not require	s/were adopted by the board of directors without shareholder action and shareholder d.	
The amendment(s) w action was not require	s/were adopted by the incorporators without shareholder action and shareholder d.	
Dated		
Signa	(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)	
	JONATHAN E. GOZZO	
	(Typed or printed name of person signing)	
	PRESIDENT	