## P140000085764

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Anend 3.7.17

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: KING C	CONSTRUCTION CFL INC
DOCUMENT NUMBER: P140000857	64
The enclosed Articles of Amendment and	
Please return all correspondence concern	ing this matter to the following:
ASDRUBAL OCA	AMP
<del> </del>	Name of Contact Person
' KING CONSTRU	CTION CFL.COM
<del>u ,</del>	Firm/ Company
328 FIELDSTREA	AM WEST BLVD
	Address
ORLANDO FL 32	2825
	City/ State and Zip Code
ASOCHE@BELLSOUT	'H.NET
•	ss: (to be used for future annual report notification)
For further information concerning this m	atter, please call:
ASDRUBAL OCAMPO	at (407 ) 383-8010
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	ount made payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Certificate C	
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassec, 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

KING CONSTRUCTION CFL INC

KING CONSTRUCTION OF LINC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P14000085764	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	" "company," or "incorporated" or the abbreviation  o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2011
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	> · · · ·
(Florida stree	address)
New Registered Office Address:	. Florida
	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wit	
Signature of New Reg	istered 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)	Title	Name	Address
1) Change	S	BRAYANN TORRES	328 FIELDSTREAM WEST BLVI
X Add			ORLANDO, FL 32825
Remove			
2) Change	<del> </del>		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			- <del>7-1511-7-</del>
Remove			
5) Change			
Add			A Company of the Comp
Remove			
6) Change			-
Add			- The service basis of the
Remove			

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)		(Be specific)
provisions for implementing the amendment if not contained in the amendment itself:		
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(if not applicable, indicate N/A)	f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares.
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	provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

02-27-2017	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
02-27-2017	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by ."	
by"  (voting group)	
<ul> <li>The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.</li> <li>The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.</li> </ul>	
detton was not required.	
02-27-2017 Dated	
Signature Sourge Ocarpo	
(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)	
ASDRUBAL OCAMPO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	