## P14000090135

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations					
NAME OF CORPOR	RATION: McRae C	onstruction,In	С		
DOCUMENT NUMB	BER: P14000090	133			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Eric O McRae				
		Name of Contact Person	1		
	McRae Constr	uction, Inc.			
	5045111	Firm/ Company			
	5345 Holopaw				
		Address			
	St. Cloud, Fl 34				
		City/ State and Zip Code	2		
mo	raesmonsters@	yahoo.com	•		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
Eric McRae	9	<sub>at (</sub> 407	565-0096 de & Daytime Telephone Number		
Name (	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$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)		
	ling Address		Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tall	ahassee, FL 32314	2661 Executive Center Circle			
		Tallahassee, FL 32301			

## Articles of Amendment to Articles of Incorporation of

McRae Construction, Inc.			<del></del>
(Name of Corporation as currently P14000090133	filed with the Florida Dept	. of State)	
	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this <i>Florida Proj</i>	fit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the c	corporation:		
			Tha not
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	p," "Inc," or "Co". A pro		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD			PH 2: 0
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be)  D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered agent.	ered office address in Flori	da, enter the name of the	IN A A I I I I I I I I I I I I I I I I I
Name of New Registered Agent			
	(Florida street address)	<del></del>	
New Registered Office Address:	·	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	egistered Agent: I am familiar with and acco	ept the obligations of the position	n.
Signature of N	New Registered Agent, if chai	nging	

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 D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s .
1) Change	V		Steven A McRae	3802 Pasadena Avenue
Add				Florence, AL 35633
Remove				
2) Change	S	<u>.</u>	Shawn C McRae	5345 Holopaw Road
Add				St. Cloud, FI 34773
Remove				
3) Change				-
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_ <del>_</del>		
Add				
Remove				

(Attach additional sheets, if necessary).	cles, enter change(s) here:  (Be specific)
<del></del>	
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	range, reclassification, or cancellation of issued shares, and and an analysis
he number of shares the corpor	ration was authorized to issue on the start date is 1
should have been 100.	

The date of each amendment(s) adoption:  date this document was signed.	_, if other than the
·	
Effective date if applicable:  (no more than 90 days after amendment file date)	_
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"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated March 16, 2015	
Signature	
(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)	_
Eric O McRae	
(Typed or printed name of person signing)	-
President	_
(Title of person signing)	_