From: Bill Moore 1/12/2015

Fax: + (850) 677-6380 To: 2015 2:02

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations Fax Number : (850)617-6380

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC. Account Number : I20050000099 Phone : (813)932-5244 Fax Number : (813)932-3782

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: bill@activatemylicense.com



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From: Bill Moore Fax: (813) 932-5244 To: Fax: +1 (850) 617-6380 Page 4 of 8 01/12/2015 2:02 (((H1500008936 3))) **COVER LETTER TO:** Amendment Section **Division of Corporations** ulldag Construction Group, Fric. NAME OF CORPORATION: 15000000740 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 10 for future annual report not -mail address: used

For further information concerning this matter, please call:

313 <u>336 - 3069</u> Area Code & Daytime Telephone Number at (Name of Contact Person

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



S43.75 Filing Fee & Certificate of Status

S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status 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

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the provisions of section 60			·	
	7 1006 Florida Stanit			
	TITUT PRIMA	es, this Florida Profit Corporation	on adopts the following amendment(s) to
ding name, enter the new	name of the corporat	ion:		
			The new	
nc.," or Co.," or the desig	gnation "Corp," "Inc.	" or "Co". A professional con	corporated" or the abbreviation poration name must contain the	
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g address <u>MAY BE A POS</u> ding the registered agent : istered agent and/or the n	and/or registered office a		ALLAHASSEE FLORIDA	
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Signature of New Registered Agent, if changing

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Example:

To:

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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.

X Change	<u>PT John</u>	a Doe	
X Remove	Y Mik	e Jones	
<u>X</u> Add	<u>SV Sail</u>	y Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
i) Change Add Remove	VP.	Dawn M. Mages C	Ord <u>ero</u> 34 <u>33 lithia Pinerest</u> Rd <u>Valrico, El. 3</u> 3596
2) Change	. <u></u>		
3) Change			
4) Change Add Remove	inte		
5) Change Add Remove			
6) Change Add Remove			
		Page 2 of 4	

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From: Bill Moore	Fax: (813) 932-5244	To:	Fax: +1 (850) 617-6380	Page 7 of 8 01/12/2015 2:02
			(((H150000	008936 3)))
	nending or adding additional	Articles, enter char	ige(s) here:	

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







From: Bill Moore	Fax: (813) 932-5244	To:	Fax: +1 (850) 617-6380	Page 8 of 8 01/12/2015 2:02
			(((H150	00008936 3)))
The da date thi	nte of each amendment(s) ado is document was signed.	ption:		, if other than the
Effecti	ve date <u>if applicable</u> :	(no more	e than 90 days after amendment file	date)
Adopti	ion of Amendment(s)	(<u>CHECK ON</u>	<u>E</u>)	
	amendment(s) was/were adopt the shareholders was/were suffi		ers. The number of votes cast for th	e amendment(s)
			ders through voting groups. The fol itled to vote separately on the amer	
	"The number of votes cast fo	r the amendment(s)	was/were sufficient for approval	
	by			
		(voting group))	
	e amendment(s) was/were adopt on was not required.	ted by the board of d	irectors without shareholder action	and shareholder
	e amendment(s) was/were adopt on was not required.	ted by the incorporat	ors without sharebolder action and	shareholder
	Dated Ol.	12.201	<u>s</u>	
		ector, president or ot	Elaenka, M.	
		by an incorporator – i fiduciary by that fi	- if in the hauds of a receiver, trusted duciary)	e, or other court
	<u> </u>	<u>frnest</u>	5. ELGERKE, Ja ped or printed name of person signi	ng)
	_		(Title of person signing)	

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