P15000003523

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MAY 01 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: NICAMEX | CONSTRUCTIO | N, INC. | |
|---|--|--|--|
| DOCUMENT NUMBER: P150000352 | 3 | | |
| The enclosed Articles of Amendment and fee are su | bmitted for filing. | | |
| Please return all correspondence concerning this ma | tter to the following: | | |
| LUZ N. ESQUIVE | <u>EL</u> | | |
| | Name of Contact Persor | 1 | |
| 4047 DIDEDO O | Firm/ Company | | |
| 1017 PIPERS C | AY UR | | |
| | Address | | |
| WEST PALM BE | ACH, FL 33415 | | |
| | City/ State and Zip Code | <u> </u> | |
| | | | |
| | | | |
| E-mail address: (to be us | sed for future annual report | notification) | |
| For further information concerning this matter, pleas | se call: | | |
| LUZ N. ESQUIVEL | at (561 | , 310-9100 | |
| Name of Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for the following amount made | payable to the Florida Depa | artment of State: | |
| □ \$35 Filing Fee | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Mailing Address | Street | Address | |
| Amendment Section | Amendment Section | | |
| Division of Corporations | Division of Corporations Clifton Building | | |
| P.O. Box 6327 Tallahassee, FL 32314 | | Executive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently filed with the F | lorida Dept. of State) | |
|---|--|--|
| P15000003523 | | |
| (Document Number of Corporation (| f known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation adopts the following | |
| A. If amending name, enter the new name of the corporation: | | |
| A |)/A | |
| Aname must be distinguishable and contain the word "corporation" ("Corp.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation | Co". A professional corporation name must | |
| 3. Enter new principal office address, if applicable: | 1017 PIPERS CAR DR. | |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | WEST PALM BEACH, FL | |
| | 33415 | |
|). If amending the registered agent and/or registered office add | ress in Florida, enter the name of the | |
| new registered agent and/or the new registered office address | | |
| Name of New Registered Agent | <u>A</u> | |
| (Florida sti | reet address) | |
| New Registered Office Address: (City) | , Florida | |
| (City) | (Zip Code) | |
| New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar | <u>:</u> with and accept the obligations of the position. | |

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 <math>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.

| Type of Action (Check One) Title Name Address Change S NIXON HEREDIA Total PIPERS CAY DR. WEST PALM BEACH, FL 33415 Change S JUAN A. LARA LOPEZ Total Pipers CAY DR WEST PALM BEACH, FL 33415 WEST PALM BEACH, FL 33415 Total Pipers CAY DR WEST PALM BEACH, FL 33415 Total Pipers CAY DR WEST PALM BEACH, FL 33415 | Example: | | ry omin, or as an riaa. | |
|---|----------------------------|--------------------------|-------------------------|---------------------|
| X Add SV Sally Smith Type of Action (Check One) 1) Change S NIXON HEREDIA 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 2) Change S JUAN A. LARA LOPEZ 1017 PIPERS CAY DR WEST PALM BEACH, FL 33415 WEST PALM BEACH, FL 33415 Change Add Remove Add Remove 1017 PIPERS CAY DR WEST PALM BEACH, FL 33415 Change Add Remove 1017 PIPERS CAY DR WEST PALM BEACH, FL 33415 | X Change | <u>PT</u> | John Doe | |
| Type of Action (Check One) Title (Check One) Name Address 1) ☐ Change ☐ Add ☐ Remove S NIXON HEREDIA 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 FL 33415 2) ☐ Change ☐ Add ☐ Remove S JUAN A. LARA LOPEZ 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 FL 33415 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 FL 33415 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 FL 33415 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 FL 33415 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 FL 33415 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 FL 33415 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 1017 PIPERS CAY DR. 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 1017 PIPERS CAY DR. 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 1017 PIPERS CAY DR. 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 1017 PIPERS CAY DR. 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 1017 PIPERS CAY DR. 1017 PIPERS CAY DR. WEST PALM BEACH, FL 33415 1017 PIPERS | X Remove | $\underline{\mathbf{V}}$ | Mike Jones | |
| Change S NIXON HEREDIA 1017 PIPERS CAY DR. | X Add | <u>sv</u> | Sally Smith | |
| Add WEST PALM BEACH, FL 33415 Change S | Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| Add WEST PALM BEACH, FL 33415 FL 33415 2) ☐ Change S JUAN A. LARA LOPEZ 1017 PIPERS CAY DR WEST PALM BEACH, FL 33415 3) ☐ Change Graph of the part of the | 1) Change | S | NIXON HEREDIA | 1017 PIPERS CAY DR. |
| ✓ Remove FL 33415 2) ☐ Change S JUAN A. LARA LOPEZ 1017 PIPERS CAY DR ✓ Add WEST PALM BEACH, FL 33415 FL 33415 ☐ Add Remove 4) ☐ Change Add ☐ Add Remove 5) ☐ Change Add ☐ Add Remove | | | | WEST PALM BEACH, |
| ✓ Add WEST PALM BEACH, ☐ Remove FL 33415 3) Change ☐ Add | | | | FL 33415 |
| ✓ Add WEST PALM BEACH, ☐ Remove FL 33415 3) Change ☐ Add | 2) Change | s | JUAN A. LARA LOPEZ | 1017 PIPERS CAY DR |
| Remove FL 33415 | | | | WEST PALM BEACH, |
| | | | | FL 33415 |
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| 4) Change | Add | | | |
| Add Remove 5) Change Add Remove 6) Change | Remove | | | |
| Add Remove 5) Change Add Remove 6) Change | 4) Change | | | |
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| 6) Change | | | | |
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| Add | | | | |
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| ach additional sheets, if necessary) |). (Be specific) |
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| n amendment provides for an exc | change, reclassification, or cancellation of issued shares, |
| ovisions for implementing the am (if not applicable, indicate N/A) | nendment if not contained in the amendment itself: |
| (y not appricable, maicale WA) | |
| | N/A |
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| Effective date if applicable: (no more than 90 days after amendment file date) | |
|---|--|
| (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 04 21 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) | |
| Luz N. Esqueuel | |
| (Typed or printed name of person signing) | |
| <u>Vice-Realdent</u> (Title of person signing) | |