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Amendous

JUL 30 2015 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: ∠ BRR	y PeyTON (ENSTRUCTION, INC
DOCUMENT NUMBER:	500000	5U33
DOCUMENT NUMBER:	00-0	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
	ARRY PE	4 10 N
	Name of Contact Perso	n
LARRY F	PYTON CNS Firm/Company	Trustion, INC.
7411 Sun	INY Brook	B14D.
	11441633	34224
- ,	City/ State and Zip Cod	le
E-mail address:	to be used for future annua	al report notification)
For further information concerning this matter, please	se call:	
LARRY LEYTON	V at 941	830.0585
Name of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for the following amount made		
Enclosed is a check for the following amount made	payable to the Florida Dep	armen of State.
□ \$35 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee
Certificate of Status	Certified Copy (Additional copy is	Certificate of Status Certified Copy
	enclosed)	(Additional Copy
	,	is enclosed)
Mailing Address	Street	Address
Amendment Section	Amendment Section	
Division of Cornerations	Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

(Name of Corporation as curr	rently filed with the Flo	rida Dept. of Sta	ate)		
	1 00 (0)		<u> </u>		
(Document Nu	mber of Corporation (if k	nown)			
Pursuant to the provisions of section 607.1006 Incorporation:	5, Florida Statutes, this co	orporation adopt	ts the following	g amendment(s) to its Articles of
A. If amending name, enter the new name of	of the corporation:				
					The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association.	"Corp," "Inc," or "Co	o". A profession	or "incorporat nal corporatio	ted" or the ab in name must c	breviation contain the
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE					
C. Enter new mailing address, if applicabl (Mailing address MAY BE A POST OFF					
(Mulling dutiess <u>MAT DE ATOST OTT</u>	ICL BOX				29 PH 12:
D. If amending the registered agent and/or new registered agent and/or the new reg		ss in Florida, en	ter the name	of the	20
Name of New Registered Agent					
	(Florida stre	et address)			
New Registered Office Address:	(City)		, Florida	(Zip Code)	
New Registered Agent's Signature, if change I hereby accept the appointment as registered		th and accent the	e obligations o	f the position	
	use of New Registered As	·	. congunons o	, 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.

Example: X Change	PT John Doe	
X Remove	V <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> Name	<u>Addres</u> s
1) Change	UP MATT PCYTON	7411 SUNNYBrook BIVE ENGKLDOOD, FL 3422
Add		Engkwood, 1/3422
Remove		
2) Change	D PAUL HORMAN MUTERS	PAUGH 3790 W KNOOLWOOD Dr.
Remove		PINCHOIN, ESTERO
3) Change		
Add		
Remove		
4) Change		
Add		+
Remove		
5) Change		
Add		
Remove		<u> </u>
6) Change		
Add		
Remove		

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	* , , ,
•	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 7-27-2015 Signature Larry Pay D.	
Signature Larry Pay D	
(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)	
LARRY PEYTON	
(Typed or printed name of person signing)	
\mathcal{D}	
Tresiden!	
(Title of person signing)	