## P15000016630

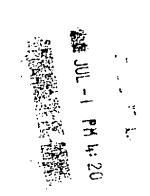
| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |

Office Use Only



200331079372

07/01/19-01138 0111 0011.



JUL 13 TOT.) CRACNAIR

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| Division of Corpo        | prations                                    |  |  |        |
|--------------------------|---|--|--|--------|
| NAME OF CORPOR           | RC7 CONSTRUCT                               | TION, INC  |  |        |
| DOCUMENT NUMB            |   |  |  |        |
|                          | of Amendment and fee are su                 |  |  | 3      |
| Please return all corres | pondence concerning this mat                | ter to the following:  |  | 30. 20 |
|                          |   | Name of Contact Persor   |  |        |
|                          |   |  |  |        |
|                          | 603 INTERLUDE LANE                          |  |  | I      |
| ,                        |   |  |  |        |
|                          | <del></del>                                 | City/ State and Zip Code   | :  |        |
|                          | E-mail address: (to be us                   | ed for future annual report  | notification)  | I      |
| For further information  | 1 concerning this matter, pleas             | se call:   |  |        |
| CARLOS GABRIEL           | GUZMAN ACEVEDO                              | 407  | 995-9198   |        |
| Name o                   | of Contact Person                           | Area Co  | de & Daytime Telephone Numbe   | r      |
| Enclosed is a check for  | r the following amount made p               | payable to the Florida Depa  | rtment of State:   |        |
| S35 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) |        |

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

## Articles of Amendment to Articles of Incorporation of

| RC7 CONSTRUCTION, INC.  |                   |                     |                             | <u>~~</u>           |
|---|-------------------|---------------------|-----------------------------|---------------------|
| (Name of Corporation a  | s currently file  | ed with the Florid  | la Dept., of State).        |                     |
| P15000016630  |                   |                     | •                           |                     |
| (Document   | Number of Cor     | rporation (if known | n)                          |                     |
| Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation:   | atutes, this Flor | idu Profit Corpora  | <i>ition</i> adopts the fol | lowing amendment(s) |
| A. If amending name, enter the new name of the corpo  | ration:           |                     |                             |                     |
|   | _                 |                     |                             | The new             |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." "word "chartered," "professional association," or the abbi | Inc." or "Co"     | . A professional c  |                             |                     |
| B. Enter new principal office address, if applicable:   | _                 |                     |                             |                     |
| (Principal office address <u>MUST BE A STREET ADDRE</u> .   | <u>SS</u> )       |                     |                             |                     |
|   |                   |                     |                             |                     |
|   | _                 |                     |                             |                     |
| C. Enter new mailing address, if applicable:  |                   |                     |                             |                     |
| (Mailing address MAY BE A POST OFFICE BOX)  | _                 |                     |                             |                     |
|   |                   |                     |                             |                     |
|   |                   |                     |                             |                     |
|   | _                 |                     | · · · -                     |                     |
| D. If amending the registered agent and/or registered of  | office address    | in Florida, enter t | he name of the              |                     |
| new registered agent and/or the new registered offic  | ce address:       |                     |                             |                     |
| Name of New Registered Agent  |                   |                     |                             |                     |
|   |                   |                     |                             |                     |
|   | (Florida street a | ddress)             |                             |                     |
|   | 1,                |                     |                             |                     |
| New Registered Office Address:  | (City             | ,;                  | , Florida                   | (Zip Code)          |
|   | (Cn)              | ,,                  |                             | (zap couc)          |
|   |                   |                     |                             |                     |
| New Registered Agent's Signature, if changing Register  | red Avent:        |                     |                             |                     |
| I hereby accept the appointment as registered agent. I am   | n familiar with   | and accept the obl  | igations of the posi        | tion.               |
|   |                   |                     |                             |                     |
|   |                   |                     |                             |                     |

Signature of New Registered 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= Treusurer, 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, Treusurer, 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                |                        |
| <u>X</u> Add               | <u>sv</u>    | Sally Smith               |                        |
| Type of Action (Check One) | <u>Title</u> | <u>Nume</u>               | <u>Addres</u> s        |
| 1) Change                  | VP           | CARLOS GABRIEL GUZMAN ACI | 2243 RIBBON FALLS PKWY |
| Add                        |              |                           | ORLANDO FLORIDA 32824  |
| x Remove                   |              |                           |                        |
| 2) Change                  |              |                           |                        |
| Add                        |              |                           |                        |
| Remove                     |              |                           |                        |
| 3)Change                   |              |                           |                        |
| Add                        |              |                           |                        |
| Remove                     |              |                           |                        |
| 4) Change                  |              |                           | <del></del>            |
| Add                        |              |                           |                        |
| Remove                     |              |                           |                        |
| 5) Change                  |              |                           |                        |
| Add                        |              |                           |                        |
| Remove                     |              |                           |                        |
| 6) Change                  |              |                           |                        |
| Add                        |              |                           |                        |
| Remove                     |              |                           |                        |

| amending or adding additional Ar<br>attach additional sheets, if necessary) | (Be specific)  |  |
|---|--|--|
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
| <u> </u>  |  |  |
| <del></del>   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
| an amendment provides for an ex-  | hange, reclassification, or cancellation of issued shares, |  |
| orovisions for implementing the am<br>(if not applicable, indicate N/A)     | endment if not contained in the amendment itself:          |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |

| · ·  | 06/17/2019  |                          |
|--|---|--------------------------|
| The date of each amendment(s date this document was signed.        | ) adoption:   | , if other than the      |
| Effective date <u>if applicable</u> : _                            |   |                          |
|  | (no more than 90 days after amendment file date)  |                          |
| Note: If the date inserted in the document's effective date on the | is block does not meet the applicable statutory filing requirements, this date w<br>Department of State's records.  | ill not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )  |                          |
| ■ The amendment(s) was/were by the shareholders was/were           | adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.   |                          |
|  | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):  | 1                        |
| "The number of votes of  | ast for the amendment(s) was/were sufficient for approval   |                          |
| by   | (voting group)  |                          |
|  | (voting group)  |                          |
| The amendment(s) was/were action was not required.                 | adopted by the board of directors without shareholder action and shareholder  |                          |
| ☐ The amendment(s) was/were action was not required.               | adopted by the incorporators without shareholder action and shareholder   |                          |
| 06/17/2<br>Dated<br>Signature •                                    | Oder Mends  |                          |
| (By<br>sele  | a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) | <del></del>              |
|  | CARLOS GABRIEL GUZMAN ACEVEDO   |                          |
|  | (Typed or printed name of person signing)   |                          |
|  | VP  |                          |
|  | (Title of person signing)   |                          |