P150000 18135

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ΓO: Amendment Section

Division of Corporations

	roranos:	TING SERVICES, INC.	_		
DOCUMENT NU	JMBER: P15000018135		<u> </u>		
The enclosed Artic	cles of Amendment and fee are su	ibmitted for filing.			
Please return all co	orrespondence concerning this ma	atter to the following:			
	ROBERT RECKLEIN				
	Name of Contact Person				
	VANDERBILT COMPANIE	ES, INC.			
		Firm/ Company			
	11983 TAMIAMI TRAIL N.				
		Address	·		
	NAPLES, FL. 34110				
	<u> </u>	City/ State and Zip Code	2		
	VanderbiltRJR@att.nct				
	•	sed for future annual report	notification)		
For further inform	ation concerning this matter, plea		594-6999 		
Name of Contact Person		at (Area Co)de & Daytime Telephone Number		
	k for the following amount made				
S35 Filing Fe	e S43.75 Filing Fee & Certificate of Status	[2]\$43,75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		

Articles of Amendment to Articles of Incorporation

of

(Name of Corporation as currently	filed with the Florida Dept. of State)
15000018135	
	Corporation (if known)
ursuant to the provisions of section 607,1006. Florida Statutes, this F s Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation," "colline.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A"	ompany," or "incorporated" or the abbreviation "Corp"
. Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	987
	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	
	-
 If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address: 	
new registered agent and/or the new registered office manifests.	
Name of New Registered Agent	
<u>-</u>	
(Florida stre	et address)
New Registered Office Address:	, Florida
·	Cny) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing

heck if applicable

J & M CONTRACTING SERVICES,INC

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and ddress of each Officer and/or Director being added:

Ittach additional sheets, if necessary)

xample:

lease note the officer/director title by the first letter of the office title:

= President; V= Vice President; T= Treasurer; S= Secretary; D - Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief xecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. resident, Treasurer, Director would be PTD.

hanges should be noted in the following manner. Currently John Doc is listed as the PST and Mike Jones is listed as the V. There is 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. fike Jones, V as Remove, and Sally Smith, SV as an Add.

Xample. X Change	<u>PT</u>	John Doe	
<u>X</u> Remove	<u>V</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
ype of Action Theck One)	Title	<u>Name</u>	<u>Addres</u> s
) Change	V	THOMAS, MICHAEL. G.	123 14TH ST SE
Add			NAPLES,FL, 34117
XX Remove			
) Change	CFO	RECKLEIN.ROBERT	11983 TAMIAMI TRAIL N.
Add			NAPLES, FL. 34110 STE 138
XX Remove) Change			
Add			
Remove			
) Change			
Add			
Remove			
/ Change			
Add			
Remove			
) Change			
Add			
Remove			

amending or adding additional Arti atach additional sheets, if necessary)	cies, enter change(s) nere: (Re specific)	
acii adanumu snecis, y necessiny)	(DC specific)	
	· · · · · · · · · · · · · · · · · · ·	
<u></u>		
		· -
	range, reclassification, or cancellation of issued shares,	
ovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
(ij noi appucame, maicine (vizi)		

.*

ie date of each amendment(s) a te this document was signed.	doption:	, if other than th
fective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date	·)
ote: If the date inserted in this becument's effective date on the D	plock does not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as th
option of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without sharel	nolder action and shareholder
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the an ufficient for approval.	nendment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendme	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	AUGUS I 31, 2020	
selecte	The Ly Wiskley Listed The Area of the color, president of other officer in the hands of a receiver, trustee, or attend fiduciary by that fiduciary)	
	LYMAN J. WINKLEY	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	· • • • • • • • • • • • • • • • • • • •