PISWO3205

(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



900317578199

11/05/18--01038--006 **43.75

Amd

R. WHITE NOV 0 9 2018

2018 NOV - 5 PM 12: 07 SECREPARY OF STATE TALL ABASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: Quantum Construc	etion, Inc	
	BER: P15000032205		
	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Scott Gordon		
		Name of Contact Person	n
	Quantum Construction, Inc.		
		Firm/ Company	
	PO Box 41483	• •	
		Address	
	Jacksonville, FL 32203		
		City/ State and Zip Cod	e
ecati/	@quantumconstruct.com		
	= '	sed for future annual report	notification)
	2 ///// (10 02 0.		,
For further informatio	n concerning this matter, pleas	se call:	
Scott Gordon		904 at (415-7920
Name	Name of Contact Person Area Code & Daytime Telephone Number		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Div P.O	ching Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations of Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Quantum Construction, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P15000032205 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: _ (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 = 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Patrick N. Gordon	1448 Cupcoy Avenue
Add			Jupiter, FL 33458
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Kenove			
6) Change			
Add			
Remove			

A	additional sheets, if necessary). (Be specific)	
		
		_
f an an	pendment provides for an exchange, reclassification, or cancellation of issued shares,	
<u>provisi</u>	ons for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)	
١,		
-		
_		

	October 1, 2018	
The date of each amendment(s) date this document was signed.	adoption:	, if other than th
	ctober 1, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendmer sufficient for approval.	t(s)
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	der
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
October Dated Signature	1, 2018	
	director, president or other officer – if directors or officers have not bee	n
selec	eted, by an incorporator - if in the hands of a receiver, trustee, or other co	
арро	ointed fiduciary by that fiduciary)	
	Scott Gordon	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

.