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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: ____ Consolidated Construction Enterprises Inc. DOCUMENT NUMBER: P15000051881 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Troy Robert Caswell Name of Contact Person Consolidated Construction Enterprises Inc Firm/ Company 431 Bayard Ave NE Address Palm Bay, FL 32904 City/ State and Zip Code treaswell68@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call; Troy Robert Caswell at (321) 961-0770
Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & S43.75 Filing Fee & □\$52.50 Filling Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Fallahassee, FL 32301

Articles of Amendment to FILED 18 HAY 29 PM 2: 30

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	Articles of Inco	orporation	\$50,00	
	of		$i_{A}^{\perp}i_{A}^{\perp}i_{A}^{\perp}$. T	STATE _
t solice!	ed C	mstru	tim t	nto prises Inc
(Name of Corporat	ion as currently	filed with the Flo	rida Dept. of State	:)
(Доси	ment Number of	Corporation (if kno	own)	
Pursuant to the provisions of section 607,1006, Florid its Articles of Incorporation:	la Statutes, this 1	Florida Profit Corp	oration adopts the l	following amendment(s) to
A. If amending name, enter the new name of the c	orporation:			
		<u></u> -		The new
name must he distinguishable and contain the wo. "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered." "professional association," or the	o, " "Inc," or "C	Co". A profession		
B. Enter new principal office address, if applicable	e:			
(Principal office address <u>MUST BE A STREET AD</u>				
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	9 V i			
[344] 344] 344] 344] 344] 344] 344] 344]	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
				 .
 If amending the registered agent and/or registered new registered agent and/or the new registered 			er the name of the	
new registered agent and on the new registered	WHILE HOUSE	<u>.</u>		
Name of New Registered Agent		<u></u>		
		-		
	(Florida stre	et inldress)		
New Registered Office Address:			. Florida	
New Registered Contro Andress.		(City)		(Zip Code)
New Registered Agent's Signature, if changing Re-				
I hereby accept the appointment as registered agent.	Lam familiar w	rith and accept the o	obligations of the pe	osition.
Sign	nature of New Re	ा अered Agent, if c	hanging	
	•		~ · · · ·	

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:

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

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	PT	John Doe	
X Remove	<u>Y</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	<u>Sally Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	T	Yvette M Caswell	431 Bayard Avenue NE
Add			Palm Bay, FL 32907
X Remove			
2) Change			
Add			
Remove			
3 + Change			
Add			
Remove		•	
4) Change			
Add			
Remove			
5) Change			
Add		N.	
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change((Attach additional sheets, if necessary). (Be specific)	<u> </u>
(Awaca additional sneets, if necessary). (Be specific)	
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If an amendment provides for an exchange, reclassificat	ion, or cancellation of issued shares,
provisions for implementing the amendment if not cont	ained in the amendment itself:
(if not applicable, indicate NA)	
ll shares are 100% owned by Troy Robert Cuswell	
is states are 17070 owned by 110y Robert Caswell	

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendme by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"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.	older
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
May 22, 2018 Dated	
Signature Trook Coscill	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	
Troy Robert Caswell	
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	