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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: EAGLE EYE GEN	IERAL CONSTRUCTION	CORP
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	PAULO GOMES		
		Name of Contact Person	1
		Firm/ Company	
	123 SW 15TH STREET	· · · · · · · · · · · · · · · · · · ·	
	DEERFIELD BEACH, FL 3	Address 3441	
		City/ State and Zip Cod	е
paulo	_acc@outlook.com	, .,	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
PAULO GOMES		954 at (de & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone N		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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation, July -3 PM 12: 15
of 17 July -3 PM 12: 15

EAGLE ETE GENERAL CONSTRUCTION CORP	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P15000055009	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	3420 NE 12TH AVE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	POMPANO BEACH, FL 33064
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 new registered agent and/or the new registered office address	
Name of New Registered Agent Name of New Registered Agent	<u>ss.</u>
	MPANO BEACH, FL 33064
(Florida st	reet address)
New Registered Office Address: 3420 NE 12TH AVE PON	MPANO BEACH , Florida 33064
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent 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.

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	P	RODRIGO DE SA	3550 BLUE LAKE DRIVE #503
Add			POMPANO BEACH, FL 33064
X Remove			
2) X Change	P	JOSE DASILVA	3420 NE 12TH AVE
Add			POMPANO BEACH, FL 33064
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
6) Change			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	. ***
1.00	
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£ durant	a total at the same of the same
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	24/2017	
Effective date <u>if applicable</u> :	9.03	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De	block does not meet the applicable statutory filing requirements, the epartment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adby the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendmufficient for approval.	nent(s)
	proved by the shareholders through voting groups. The following start 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)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	
06/27/201 Dated	$\frac{1}{2}$	
Signature 🔨	TUUS	
(By a d	lirector, president or other officer - if directors or officers have not b	een
	d, by an incorporator - if in the hands of a receiver, trustee, or other	court
appoin	ted fiduciary by that fiduciary)	
	JOSE DASILVA	
	(Typed or printed name of person signing)	,
	President	
	(Title of person signing)	