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(Re	equestor's Name)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
				
Special Instructions to	Filing Officer:			
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JI CHETARY OF STATE

DEC 1 2 2016 C LEVARS

COVER LETTER

TO: Amendment Section Division of Corporations	7
NAME OF CORPORATION: Production Production	art Construction IUC.
The enclosed Articles of Amendment and fee are sul	bmitted for filing.
Please return all correspondence concerning this mat	tter to the following:
Aime	e Gorealez
Proste	Name of Contact Person
9815	Firm/Company 5 U U ST
Mic	Address City/ State and Zip Code
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, pleas	e call:
Amee Gonzale Name of Contact Person	2 at 780 299 2903 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	
\$35 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 Amend	ment		•
	to Articles of Incorpo	ration		SECRETARY OF STATE
	of	í \. ~		DIVISION OF CORPORATI
trostart	Constr	<u>va10n-</u>	tuc	2016 DEC - 9 PM 4: !
(Name of Corporat	tion as currently file	d with the Florida I	Dept. of State	Ð
V 150()00	16678	X		
(Docu	ment Number of Corp	ooration (if known)		
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this <i>Flori</i>	da Profit Corporatio	on adopts the	following amendment(s) to
A. If amending name, enter the new name of the c	orporation:			
				The new
"Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	e abbreviation "P.A."		poration nam	e must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>ox</u>)			
	_			
	_			
D. If amending the registered agent and/or registe	ered office address is	ı Florida, enter the	name of the	
new registered agent and/or the new registered				
Name of New Registered Agent				
	(Florida street ad	dress)		
New Registered Office Address:			. Florida	
Her Hegister en Office Mair ess.	(City)		, 1 101100_	(Zip Code)
New Registered Agent's Signature, if changing Re	distored Agent.			
New Registered Agent's Signature, it changing Re I hereby accept the appointment as registered agent.		nd accept the obliga	tions of the p	osition.

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)	Title	Name Address
1) Change	<u>, V</u>	Raul Martinez 9815 sul 145t
Add Add		Miam 1-4.331
Remove		
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		······································
Remove		

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The date of each amendment(s) adoption: date this document was signed.		1011		F :1	f other than the
Effective date if applicable:	12	101	2016	SECRETARY DIVISION OF CO	ORPORATION
Effective date <u>if applicable</u> :	(no more than 90	days after	amendment file d		
Note: If the date inserted in this block does n document's effective date on the Department of		able statute	ory filing requirem		
Adoption of Amendment(s) (CH	ECK ONE)				
the amendment(s) was/were adopted by the by the shareholders was/were sufficient for a		number of	votes cast for the	amendment(s)	
☐ The amendment(s) was/were approved by the must be separately provided for each voting					
"The number of votes cast for the amer	ndment(s) was/were	e sufficient	for approval		
by	ting group)		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(VOI	ing group)				
☐ The amendment(s) was/were adopted by the action was not required.	board of directors	without sha	areholder action an	nd shareholder	
The amendment(s) was/were adopted by the action was not required.	incorporators with	out shareho	older action and sh	areholder	
Dated 12 01	2016	7	_)		
Signature			· · · · · · · · · · · · · · · · · · ·		
(By a director, press selected, by an inco appointed fiduciary	orporator – if in the				
	tirles	<u>6</u>	nzale	Z	
	Typed or printed n	ame of per	son signing)		
	reside	<u>ent</u>			
	(Title o	f person si	onino)		