## P150000 86690

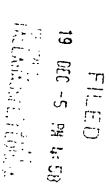
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JAN 1 0 2020 S. YOUNG

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: D-L-E MONZON	SERVICES INC	
DOCUMENT NUMB			
The enclosed Articles (	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	ADELMAR MONZON		
-		Name of Contact Person	n .
	D-L-E MONZON SERVICE	S INC	
-		Firm/ Company	<del></del>
	1432 KIRK RD		
-	•	Address	<del></del>
	WEST PALM BEACH FL 3.	3406	
-		City/ State and Zip Cod	e
For further information	concerning this matter, please		, and the second
<del></del>		at (	
	f Contact Person the following amount made		
S35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

D-L-E MONZON SERVICES INC.

. . . . .

A) CO	A CLASS A COLOR
P15000086690	ntly filed with the Florida Dept. of State)
	r of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: D-L-E CONSTRUCTION SERVICES INC	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co", "chartered," "professional association," or the abbreviation "P.,	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1489 SCOTTSDALE RD NORTH
(Principal office address MUST BE A STREET ADDRESS)	WEST PALM BEACH FL 33417
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1489 SCOTTSDALE RD NORTH WEST PALM BEACH FL 33417
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr  Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ar with and accept the obligations of the position.
Signature of Nev	v 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	V	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	VP	HERMES R. QUEVEDO WHITCHE	1489 SCOTTSDALE RD NORTH	
$X_{Add}$			WEST PALM BEACH FL 33417	
Remove				
2) Change				
Add				
X Remove Change	VP	YOLITA G CALDERON	WEST PALM BEACH FL 33406	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change			<del></del>	
Add				
Remove				
		Page 2 of 4		
		ional Articles, enter change(s) here: cessary). (Be specific)		

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provisions for unplementing the after	idment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
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	ndment if not contained in the amendment itself:	
	Page 3 of 4	
(if not applicable, indicate N/A)	Page 3 of 4	
(if not applicable, indicate N/A)  The date of each amendment(s) adoption:		if other than t
The date of each amendment(s) adoption:	Page 3 of 4	if other than t
(if not applicable, indicate N/A)	Page 3 of 4	if other than t

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

1. A. C. P. S. J.

Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) at for approval.
* /	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	e amendment(s) was/were sufficient for approval
by	
	(voting group)
☐ The amendment(s) was/were adopted by action was not required.	by the board of directors without shareholder action and shareholder
action was not required.  Dated 11/28/2019	by the incorporators without shareholder action and shareholder
	president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)
ADE	LMAR MONZON
	(Typed or printed name of person signing)
PRES	SIDENT
(Title	of person signing)