# P16000005106

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	VALLEJO & S	ON CONSTRUCTION INC	
OOCUMENT NUMBER:	P16000005106		<u> </u>
The enclosed Articles of Amenda	nent and fee are sub	omitted for filing.	
Please return all correspondence	concerning this mat	ter to the following:	
		ISAIAS VALLEJO	
<del></del>		Name of Contact Person	
	VALLEJO	& SON CONSTRUCTIO	N INC
		Firm/ Company	
	5450 BRU	CE B DOWNS BLVD	
<del> </del>		Address	
	WESLEY	CHAPEL, FL 33543	
		City/ State and Zip Code	:
For further information concerni	ng this matter, pleas	813	442-0576
Name of Contact	Darecon	at (	) de & Daytime Telephone Number
Enclosed is a check for the follo			
	3.75 Filing Fee & ertificate 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)
Mailing Add			Address

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### Articles of Amendment to Articles of Incorporation of

# VALLEJO & SON CONSTRUCTION INC

(Name of Corporation as	currently filed with the Florida Dept. of State)
<del></del> -	000005106
(Document )	Number of Corporation (if known)
arsuant to the provisions of section 607.1006, Florida Stat Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendar
If amending name, enter the new name of the corpor	ration:
	The ne
ame must be distinguishable and contain the word "c Corp.," "Inc.," or Co.," or the designation "Corp." "I ord "chartered," "professional association," or the abbi	corporation," "company," or "incorporated" or the abbreviation lnc," or "Co". A professional corporation name must contain the reviation "P.A."
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRES	<u>SSS</u> )
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
). If amending the registered agent and/or registered on new registered agent and/or the new registered officers.	office address in Florida, enter the name of the ce address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Office Address:	(City) . Florida (Zip Code)
New Registered Agent's Signature, if changing Registe	ered Agent:
I hereby accept the appointment as registered agent. I at	m familiar with and accept the obligations of the position.
Signatu	re 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 tale 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>P7</u>	John Doc	
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>Address</u>
1) X Change	P	ISAIAS VALLEJO	5450 BRUCE B DOWNS BLVD
Add			WESLEY CHAPEL, FL 33543
Remove			
2) X Change	VP	KEITH T. CRAPE	2222 WEST STATE
Add		_	TAMPA, FL 33609
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
<i>5)</i> Change			
Add			
Remove			
6) Change			
Add			
Remove			

. <u>11 gujetii</u> Attach /	ling or adding additional Articles, enter change(s) here: dditional sheets, if necessary). (Be specific)
	E WITH THIS CHANGE OF DIRECTORS, THE SDSHARES DISTRIBUTIONS REMAINS THE SAME:
% FOR N	EW PRESIDENT, ISAIAS VALLEJO AND 98% FOR NEW VICE=PRESIDENT KEITHT. CRAPE. IT
T SHOUL	D BE NOTED THAT SHAREHOLDERS ARE HAVING THE SAME RIGHTS, OBLIGATIONS AND
CORPORA	TION LIABILITIES AS OF THE PERCENTAGE OF THEIR SHARES.
F. <u>Ifan a</u>	mendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>provi</u> s (į	ions for implementing the amendment if not contained in the amendment itself: f not applicable, indicate N/A)

FEBRUARY 14, 2017
The date of each amendment(s) adoption:, if other than date this document was signed.
Effective date if applicable: (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 date will not be listed as document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval
by (voting group)
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated
Signature   (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
ISAIAS VALLEJO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)