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Florida Department of State

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OCT 1.3 2015

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	rion:	NRL CONSTRUCTION I	NC				
DOCUMENT NUMBER	OCUMENT NUMBER: P16000039702						
The enclosed Articles of Amendment and fee arc submitted for filing.							
Please return all correspo	ndence concerning this ma	tter to the following:					
	NORBERTO LUITON						
	Name of Contact Person						
. -		Firm/ Company					
	559	O CURRY FORD RD API	7 15F				
_		Address	· · · · · · · · · · · · · · · · · · ·				
		ORLANDO, FL 32822					
		City/ State and Zip Cod	0				
· NRLCO	NSTRUCTIONINC11@G	MAIL.COM					
 		ed for future annual report	notification)				
For further information concerning this matter, please call: NORBERTO LUITON .407 .459 3686							
	Contact Person	et (407	de & Daytime Telephone Number				
		payable to the Florida Depa	•				
■ \$35 Filing Fæ	D\$43.75 Filing Foc & 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 Divisio Clifton 26 61 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301				

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To:8506176380

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Articles of Amendment Articles of Incorporation of

ЯИ	L CONSTRUCTION INC			
(Name of Corporat	ion as currently filed with the Florida I	Dept. of State)		
	P16000039702	·		
(Доси	ment Number of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·		
Pursuant to the provisions of section 607-1006, Floridits Articles of Incorporation:	la Statutes, this Florida Profit Corporatio	ne adopts the followin	ig amend	lment(s)
A. If amending name, enter the new name of the c	orporation:			
		·	The n	18W
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	p," "Inc," or "Co". A professional corp	poration name must	contain	the
B. Enter new principal office address, if applicabl	e:		<u> </u>	<u> </u>
Principal office address MUST BE A STREET AD	DRESS)		3	3
			3> 5	
			<u> </u>	_2
C. Enter new mailing address, if applicable:	, 			
(Mailing address MAY BE A POST OFFICE BO	<u></u>			چب –
			(5 ⁻¹) (7	Û
				_
D. If amending the registered agent and/or registe new registered agent and/or the new registered	red office address in Florida, enter the l office address:	name of the		
Name of New Registered Agent		,	_	
	(Florida street address)		_	
		, Florida		
New Registered Office Address:		1 101100		

I 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

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If amending the Officers aud/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer aud/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 <math>PTD.

Changes should be noted in the following mamner. 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: . <u>X</u> Change	<u>PT</u>	<u> Iohn D</u>	<u>oc</u>	
X Remove	¥	Mike J	o <u>nes</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	RAFAEL ROLANDO BARRERA C	1317 MILL SLOUGH RD
X Add				KISSIMMEE FL 34744
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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	nal sheets, if neces	ssary). (Be specifi	ic)			
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an amendu	<u>ient provides for a</u> or implementing th	an exchange, reclas he amendment if n	ssification, or cane ot contained in the	ellation of issued sl amendment itself:	ares.	
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10/12/2016	_
The date of each amendment(s) adoption:	, if other than the
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 we document's effective date on the Department of State's records.	ill 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 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 cast for the amendment(s) was/were sufficient for approval	
by"	
by	
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.	
10/12/2016 Dated	
Signature <u>Other Don't Com</u> (By a director, president or other officer – if directors or officers have not been	<u> </u>
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
NORBERTO LUITON	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	