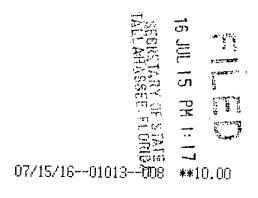
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(Re	questor's Name)	
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PICK-UP	MAIT WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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AMend

JUL 1 5 2016 D CONNELL

COVER LETTER

TO: Amendment Section Division of Corporations

• •					
NAME OF CORPORATION	J. Smit	h cont	ractin	g IN	
DOCUMENT NUMBER:	P16 0000	057200)		
The enclosed Articles of Amen	dment and fee are sub	mitted for filing.			
Please return all correspondenc	e concerning this matt	er to the followin	g:		
	Joe	A . S	mith		
	J. Smit	h Conti	ractin	a Inc	· · · · · · · · · · · · · · · · · · ·
·	6525 F				
· .	Havana, F				
	·	City/ State and	Zip Code		
E-n	nail address: (to be use	ed fo: fature anni	al report not	ification)	
For further information concern	ing this matter, pleas	e call:			
Joe A. si	nith	ai (850	661	-64.18
Name of Conta-	ct Person		Area Code	& Daytime 7	elephone Number
Enclosed is a check for the following	owing amount made p	payable to the Flo	rida Departn	nent of State	;
-	43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Cop (Additional control enclosed)	ру	□\$52,50 Fil Certificate Certified C (Additiona is enclose	of Status Copy I Copy
<u>Mailing Ad</u> Amendment Division of (Section			Idress ent Section of Corporation	ons

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

State State

J. Smith (Name of Corporation as currently filed with the Florida Dept. of State) 16 JUL 15 PM 1:17

P160000 57200 (Document Number of Corporation (if known)

idment(s) to

ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cord "chartered," "professional association," or the abbreviation ".	n," "company," or "incorporated" or the ab Co". A professional corporation name must c	
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		· <u>-</u>
If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida str	reet address)	
New Registered Office Address: (City)	, Florida	•
	(Zip Code)	

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 <math>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.

Mike Jones, V as Remove Example:	e, and Sal	ly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	$\overline{\lambda}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VICE	President Gabriel Smith	6525 Fair But Ferry
Add Remove ·		·	Havana, Fl. 32333
2) Change	veracti	ons CEO Tony Run Smith	6525 Foirfank Ferry Rd. Havana, 32333
Add			Havana, sass
5) Change 1/8	asury	offinance Alkela Smith	6525 FalsBack Ferng Rd. Horana, H. 32333
L Remove	,		Hara H. 32333
4) Change			
Add			**************************************
Remove			
5) Change			
Add			
Remove			
6) Change	<u> </u>	_	
Add			
Remove			

ttach additional sheets, if necessa	ary). (Be specif	īc)			
					
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		1 <i>e</i>		·	
an amendment provides for an provisions for implementing the					<u>S,</u>
(if not applicable, indicate N					
			·	. <u></u>	
					
	 _				

The date of each amendment(s) adoption:	, if other than
Effective date if applicable:	
(no more than 90 days after amendment file date)	_
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(3) was/were sufficient for approval	
(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 (b) director, president or other officer – if directors or officers have not been	
ected, by an incorporator – if in the hands of a receiver, trustee, or other court eppointed fiduciary by that fiduciary)	
Soe A. Smith	
(Typed or printed name of person signing)	
1) 1) // // A	

the