## P1600070690

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Unicco Construction	on Group, Inc			
	1BER: P1600007069				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	NILS KUSHTA				
	<del></del>	Name of Contact Person	-,		
	UNICCO CONSTRUCTION GROUP INC.				
		Firm/ Company			
	830 DOUGLAS AVE	t min company			
		Address			
	DUNEDIN FL 34698				
		City/ State and Zip Code			
NII	S@UNICCOBUILD.COM				
	E-mail address: (to be us	sed for future annual report r	notification)		
	,	•	,		
For further informati	on concerning this matter, pleas	se call:			
NILS KUSHTA		at ( <sup>727</sup>	254-9061		
Namo	of Contact Person	Area Cod	e & Daytime Telephone Number		
Enclosed is a check t	for the following amount made	payable to the Florida Depar	tment of State:		
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		Street A			
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327			Building		
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, Fl. 32301

## Articles of Amendment to Articles of Incorporation of

FILED

UNICCO CONSTRUCTION GROUP, INC.

2019 JAN -9 PM 6: 23

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	· Aut Of S		
P16000070690	4.	AHASSEE,		
	of Corporation (if known)	-		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the followi	ng amendment(s) to		
A. If amending name, enter the new name of the corporation:				
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must	The new abbreviation contain the		
B. Enter new principal office address, if applicable:	830 DOUGLAS AVE			
(Principal office address MUST BE A STREET ADDRESS )	DUNEDIN, FL 34698	<del>-</del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	830 DOUGLAS AVE			
	DUNEDIN, FL 34698			
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent	dress in Florida, enter the name of the			
(Florida s	treet address)	_		
New Registered Office Address:	(Cny) , Florida (Zip	Code)		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	<u>t:</u> with and accept the obligations of the position.			
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)	<u>Title</u>	<u>Name</u>	Address
1) Change	υ	MAUK, JOHN	16803 ASHWOOD DR
Add X Remove			TAMPA, FL 33624
2) Change Add			
Remove 3)ChangeAdd			
Remove			
4) Change			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	• • • • • • • • • • • • • • • • • • •			
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If an amendment provides for an exch	ange, reclassifica	tion, or cancellation	on of issued share	<u>s.</u>	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not con	tained in the ame	ndment itself:		
(ly not apprecion, minetic ron)					
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	<del>.</del>			<u> </u>	
				<u> </u>	
		<u> </u>	<del></del>		

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
J		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for the amendmen ficient for approval.	u(s)
	oved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast I	or the amendment(s) was/were sufficient for approval	
by	;"	
	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and sharehol	der
The amendment(s) was/were adoption was not required.	oted by the incorporators without shareholder action and shareholder	
1/7/19 Dated		
Signature //	6 land	
(By a di selected	rector, president or other officer = if directors or officers have not bee, by an incorporator = if in the hands of a receiver, trustee, or other cord fiduciary by that fiduciary)	
	NILS KUSHTA	
-	(Typed or printed name of person signing)	
	VICE PRESIDENT	
-	(Title of person signing)	