

P160000 87622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

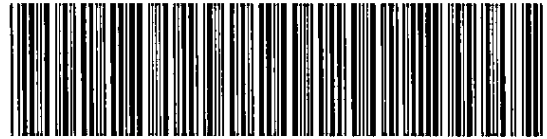
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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05/03/19--01029--017 +\$35.00

2019 JUN 20 PM 1:13

FILED

Amend

JUN 20 2019  
ALBRITTON

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: DR Capital Construction Inc.

DOCUMENT NUMBER: P16000037622

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Manuela Rosain  
Name of Contact Person  
Kabz Consulting Inc  
Firm/ Company  
1635 E Hwy 50 Ste 203  
Address  
Clement FL 32711  
City/ State and Zip Code  
manuela@kabzconsulting.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Manuela Rosain at ( 352 ) 432-1048  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|---|--|---|--|

Mailing Address  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 15, 2019

MARIELA ROSARIO      3rd mailing  
1655 EAST HIGHWAY 50  
STE. 203  
CLERMONT, FL 34711

SUBJECT: DR CENTRAL CONSTRUCTION, INC  
Ref. Number: P16000087622

We have received your document for DR CENTRAL CONSTRUCTION, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 519A00009733



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 30, 2019

MARIELA ROSARIO  
13750 W. COLONIAL DR  
WINTER GARDEN, FL 34787

SUBJECT: DR CENTRAL CONSTRUCTION, INC  
Ref. Number: P16000087622

We have received your document for DR CENTRAL CONSTRUCTION, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 519A00009733

RECEIVED

2019 JUN 14 PM 2:30

STATE OF FLORIDA  
TALLAHASSEE

RTS

Unknown

Ste # required

and

Box #

1655 EAST  
Highway 50  
Ste # 203  
Clermont  
34711



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 14, 2019

MARIELA ROSARIO  
1615 E. HWY 50  
STE. 203  
CLERMONT, FL 34711

SUBJECT: DR CENTRAL CONSTRUCTION, INC  
Ref. Number: P16000087622

We have received your document for DR CENTRAL CONSTRUCTION, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Irene Albritton  
Regulatory Specialist II

Letter Number: 519A00009733

2019 MAY 29 AM 10:38  
RECEIVED  
TAMPA, FL 33602

Articles of Amendment  
to  
Articles of Incorporation  
of

DR Central Construction, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P16 000087622

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*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*

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:

☒ Change      PT      John Doe

☐ Remove      V      Mike Jones

☐ Add      SV      Sally Smith

| Type of Action<br>(Check One)              | Title    | Name                   | Address                      |
|--|----------|------------------------|------------------------------|
| 1) <input type="checkbox"/> Change         | <u>D</u> | <u>David Rojas Jr.</u> | <u>13750 W. Colorado Dr.</u> |
| <input type="checkbox"/> Add               |          |                        | <u>W. to Order #1 3487</u>   |
| <input checked="" type="checkbox"/> Remove |          |                        |                              |
| 2) <input type="checkbox"/> Change         |          |                        |                              |
| <input type="checkbox"/> Add               |          |                        |                              |
| <input type="checkbox"/> Remove            |          |                        |                              |
| 3) <input type="checkbox"/> Change         |          |                        |                              |
| <input type="checkbox"/> Add               |          |                        |                              |
| <input type="checkbox"/> Remove            |          |                        |                              |
| 4) <input type="checkbox"/> Change         |          |                        |                              |
| <input type="checkbox"/> Add               |          |                        |                              |
| <input type="checkbox"/> Remove            |          |                        |                              |
| 5) <input type="checkbox"/> Change         |          |                        |                              |
| <input type="checkbox"/> Add               |          |                        |                              |
| <input type="checkbox"/> Remove            |          |                        |                              |
| 6) <input type="checkbox"/> Change         |          |                        |                              |
| <input type="checkbox"/> Add               |          |                        |                              |
| <input type="checkbox"/> Remove            |          |                        |                              |





The date of each amendment(s) adoption: \_\_\_\_\_, if other than the 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 the 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 cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_."  
(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 4/30/2019

Signature David Rojas

(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)

David Rojas  
(Typed or printed name of person signing)

P  
(Title of person signing)