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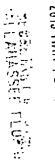
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Brook + Stone Contracting + Consulting Services DOCUMENT NUMBER: \$1700000 8333
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Telix O Polanco Name of Contact Person
Brook + Stone Contracting & Consulting IN
71 A REGAZ WACK
Address
Strten IS And NY 10303 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rosa Riverà at (850) 333-9238 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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy 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

Articles of Amendment to

Articles of Incorporation of

Brook + Stone Contracting	a Consulting Services INC
(Name of Corporation as currently)	iled with the Florida Dept. of State)
<u> </u>	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatis</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	INC
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	The new "company," or "incorporated" or the abbreviation or ". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	10808 SW 225 3+ MIANY A 33170
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	71 A Regal WALK Staten Island Ny 10303
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	
(Florida streed New Registered Office Address:	(address) A Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	
	· · · · ·

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: XChange	<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>	Name	<u>e</u>			Address
1) Change					_	
Add					-	
Remove					-	
2) Change		_			٦ -	
Add				. /	-	<u></u>
Remove				Λ	.	η
3) Change		-		/	_	· · · · · · · · · · · · · · · · · · ·
Add					-	
Remove					-	
4) Change					-	
Add					-	
Remove					-	
5) Change					-	
Add					-	
Remove					-	
6) Change					_	
Add						
Remove						

attach additional sheets, if necessary). (Be specific)	
	<u> </u>
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<u>If an amendment provides for an exchange, reclassifica</u>	ntained in the amendment itself:
provisions for implementing the amendment if not con	
provisions for implementing the amendment if not con	
provisions for implementing the amendment if not con (if not applicable, indicate N/A)	
provisions for implementing the amendment if not con	
provisions for implementing the amendment if not con	
provisions for implementing the amendment if not con	
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provisions for implementing the amendment if not con	
provisions for implementing the amendment if not con	

The date of each amendment(s) adoption date this document was signed.	3/10/2019	, if other than t
Effective date if applicable:	(no more than 90 days after amendment file of	late)
Note: If the date inserted in this block do document's effective date on the Department	es not meet the applicable statutory filing requirent of State's records.	nents, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes east for the for approval.	amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each ve	y the shareholders through voting groups. The folloting group entitled to vote separately on the amend	owing statement lment(s):
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	
☐ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action a	nd shareholder
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and sh	areholder
Dated3	10/2019	
Signature <u>1e</u> l	i O Polani	
(By a director,	president or other officer - if directors or officers have	ave not been
	incorporator - if in the hands of a receiver, trustee,	or other court
appointed fidu	ciary by that fiduciary)	
	Felix o Polone	D.
	(Typed or printed name of person signing)	
	President.	
	(Title of person signing)	