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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Nautilus Civil Con	structors, Inc.	
DOCUMENT NUM	P17000019876		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	W. Curtis Smith, PE		
		Name of Contact Persor	1
	Nautilus Civil Constructors,	Inc.	
		Firm/ Company	
	69 Cypress Breeze Blvd S		
		Address	
	Santa Rosa Beach, FL 32459		
		City/ State and Zip Code	<u> </u>
curt	s@nautiluscivil.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
W. Curtis Smith		at (⁶¹⁵	210-2150
Namo	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check (or the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di P.C	neiling Address mendment Section vision of Corporations D. Box 6327 Bahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

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to

Nautilus Civil Constructors, Inc.	With the Control
(Name of Corporation as cu	urrently filed with the Florit adept of State);
P17000019876	
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendments
A. If amending name, enter the new name of the corporati	ion:
n/a	The new
	poration," "company," or "incorporated" or the abbreviation ," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	n/a
(Principal office address MUST BE A STREET ADDRESS))
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office a	
Name of New Registered Agent	
nume of New Regimered Agent	
(El	orida street address)
tr to	riua Mvet duaress)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	
Signature of	f 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	PT	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	P		Rene Garcia	PO Box 2328
Add		_		Santa Rosa Beach, FL 32459
X Remove				
2) X Change	P		William Curtis Smith	69 Cypress Breeze Blvd S
Add				Santa Rosa Beach, FL 32459
Remove				
3) Change		_	.	
Add				-
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change				
Add		_		
Remove				10-201

Attach addition	adding additional Arti al sheets, if necessary).	(Be specific)			
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an amendme provisions for	nt provides for an exch implementing the ame	<u>ange, reclassifica</u> ndment if not con	tion, or cancellation tained in the amen	on of issued shares, diment itself:	
(if not app	licable, indicate N/A)				
\					
•					
		 			

The date of each amendment(s) adoption: if other than
date this document was signed.
3/1/2017 Effective date if applicable:
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 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 east 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 east 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.
8/21/2017
DatedSignature
(By a director, president of 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)
appointed indiciary by that indiciary)
William Curtis Smith
(Typed or printed name of person signing)
President / Incorporator / Registered Agent
(Title of person signing)