P17000020201

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ΓΙΟΝ: F & J CONSTRUC	CTION INC.	
DOCUMENT NUMBER	R:		
	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
JO	AQUIN CASTILLO JR		
		Name of Contact Person	1
F.	& J CONSTRUCTION IN	C	
			
PC) BOX 132	Firm/ Company	
_		Address	
U	MATILLA, FL 32784		
_	-	City/ State and Zip Cod	<u></u>
OLSON	INS@YAHOO.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information ed	oncerning this matter, pleas	se call:	
JOAQUIN CASTILLO J	R	at (396-8400
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Depo	artment 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)
Amend Divisio P.O. Be	2 Address ment Section n of Corporations ox 6327 ssee, FL 32314	Ameno Divisio Clifton 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assee, F1, 32301

Articles of Amendment to Articles of Incorporation of

F & J CONSTRUCTION INC.

(Name of Corporation as cu	rrently filed with the Florida Dept. of State)
P17000020301	
(Document Nur	nber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	on:
ALPHA MASONRY INC.	The new
name must be distinguishable and contain the word "corp," "Inc,," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the ation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered officenew registered agent and/or the new registered office a	
Name of New Registered Agent	
(Flo	rida street address)
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	New Revistered Agent, if changing
i i i i i i i i i i i i i i i i i i i	The state of the s

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 Do	<u>c</u>	
X Remove	<u>V</u>	Mike Jo	nes	
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change				
Add		_		
Remove				
Xelik Se				
4) Change		_		
Add				•
Remove				
E) (the same				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
	, 1, 2, 4, 5, 10, 10, 10, 10, 10, 10, 10, 10, 10, 10
.	
	·
	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	The state of the s
	Mr. D. V.
4.1-14-1	

	08/22/17	115
The date of each amendment(s date this document was signed.	adoption:	, if other than the
-	08/22/17	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory tiling requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s e sufficient for approval.)
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	ent.
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder	
action was not required.	adopted by the incorporators without shareholder action and shareholder	
08/22/)	7	
Dated	1	
Signatur	1-oggin potelle	
	a director, president or other officer - if directors or officers have not been	
	reted, by an incorporator – if in the hands of a receiver, trustee, or other court	
арр	ointed fiduciary by that fiduciary)	
	JOAQUIN CASTILLO JR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	