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(Address)				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: PRECISION FOUR	NDATIONS, INC.			
DOCUMENT NUMB	ER: P17000044494				
	of Amendment and fee are sul	bmitted for filing.			
Please return all corres	pondence concerning this mat	tter to the following:			
	PAMELA DOWDY				
-		Name of Contact Perso			
	THE GOLDFIELD CORPOR	ATION			
•		Firm/ Company			
	1684 W. HIBISCUS BLVD.				
-		Address			
	MELBOURNE, FL 32901				
-		City/ State and Zip Cod	le		
TAX@GOLDFIELDCORP.COM					
-	E-mail address: (to be us	ed for future annual report	t notification)		
For further information	concerning this matter, pleas	e call:			
PAMELA DOWDY		at (<u>321</u>	724-1700		
Name of Contact Person		Area Co	ode & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Dep	artment of State:		
■ \$35 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			



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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 26, 2020

PAMELA DOWDY
THE GOLDFIELD CORPORATION
1684 W. HIBISCUS BLVD
MELBOURNE, FL 32901

SUBJECT: PRECISION FOUNDATIONS, INC.

Ref. Number: P17000044494

We have received your document for PRECISION FOUNDATIONS, 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):

The document is illegible and not acceptable for imaging.

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: 720A00012661

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	tly filed with the Florid	da Dent of State)	
P17000044494	ny mea with me riorie	Ja Dept. of State	
(Document Number	of Corporation (if know	m)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corpor	ation adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of the corporation:			
N/A			The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	A professional corpore		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		20:0 JUL 17 6H 11:05
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		the name of the	05
Name of New Registered Agent N/A	33.		
(Florida s	treet address)		
New Registered Office Address:		, Florida	
	(City)	(Zi	p Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		ligations of the position	7.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.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)

Example:

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.

X Change	<u>PT</u>	John Doe	<u>e</u>	
X Remove	<u>v</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	<u>iith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
i) Change	AV	_	BOBBY D. CLAXTON	1684 W. HIBISCUS BLVD.
X Add				MELBOURNE, FL 32901
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add		_		
Pamoua				

(Atta	nending or adding th additional sheets	s, if necessary).	(Be specific)			
N/A						
		.				
				<u></u>		
		•			•	
						•
F. If ar	amendment provi visions for implem	ides for an excha	inge, reclassific	ation, or cancell	ation of issued sh	ares,
<u> </u>	(if not applicable,		unicht ii not co	intained the the a	menginent tisen.	
N/A						
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_, if other than t
not be listed as t
sharcholder
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