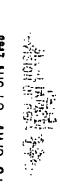
P170000 45497

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: BLAKY CONSTRUCTION, INC. DOCUMENT NUMBER: P17000045497 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAMON RIVERA Name of Contact Person IPS SERVICES, INC. Firm/ Company 339 6TH AVE WEST Address **BRADENTON, FL 34205** City/ State and Zip Code INFO@GO-IPS.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RAMON RIVERA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee S35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) 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

BLAKY CONSTRUCTION.	INC

(Name	of Corporation as current	ly filed with the Florida Dept. of State)	J. 5		
P17000045497			Ne 10		
	•	of Corporation (if known)	至		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the follow	ing amending		
A. If amending name, enter the new na	ame of the corporation:				
BLAKY SERVICES, INC.			The new		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	on," "company," or "incorporated" or the "Co". A professional corporation name mus "P.A."	abbreviation t contain the		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		15520 SW 305th ST			
		HOMESTEAD, FL 33033			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		15520 SW 305th ST			
		HOMESTEAD, FL 33033			
D. If amending the registered agent an	who revistored affice add	ross in Florida, enter the name of the			
new registered agent and/or the new	w registered office addres	S:			
Name of New Registered Agent	FERMIN B. BADILLO				
Name of New Registered Agent	15520 SW 305th ST				
	(Florida st	reet address)			
New Registered Office Address:	HOMESTEAD	Florida 33033			
	·····	(City) (Zi	p Code)		
New Registered Agent's Signature, if c	hanging Registered Agent	:			
I hereby accept the appointment as regist	tered agent. I am familiar	with and accept the obligations of the position	1.		
	_				
	F				
	Simulation College	Pagistanad Agant 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 <math>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 Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Nam</u>	<u>ne</u>		<u>Addres</u> s	
1) x Change	P	FEF	RMIN B BADILLO		15520 SW 305th ST	_
Add					HOMESTEAD, FL 33033	_
Remove						
2) Change						
Add						_
Remove						_
3) Change						
Add						_
Remove						
4) Change	<u> </u>	_				_
Add						_
Remove						_
5) Change						_
Add		-				
Remove						_
Kemove						_
6) Change						_
Add						_
Remove						

If amending or adding additional Artical (Attach additional sheets, if necessary).	(Be specific)
'A	
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	idment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
Α	

	JUNE 9, 2017	
The date of each amendment(s)	doption:, if other	than th
date this document was signed. Jt.	NE 9, 2017	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be liste epartment of State's records.	d as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were as by the shareholders was/were	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
☐ The amendment(s) was/were a must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes can	for the amendment(s) was/were sufficient for approval	
bv		
	(voting group)	
☐ The amendment(s) was/were action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	opted by the incorporators without shareholder action and shareholder	
06-09-17 Dated		
Dated	+0	
Signature		
(By a select	lirecton president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	FERMIN B BADILLO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	