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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	RPORATION:	ROQUES FAMIL	Y PREMIER CONSTRUC	CTION INC.
DOCUMENT N		P17000050259		
The enclosed Art	icles of Amendi	nent and fee are su	ibmitted for filing.	
Please return all o	correspondence	concerning this ma	tter to the following:	
	Roques Co	osta		
	-		Name of Contact Person	1
•	Roques Fa	mily Premier Cons	struction	
	.	·	Firm/ Company	
	1605 Rena	issance Commons	Blvd # 122	
			Address	
	Boynton B	Beach, FI 33426		
			City/ State and Zip Code	e
	derespo	51@att.net		
-	E-mai	il address: (to be us	sed for future annual report	notification)
For further inform	nation concernin	g this matter, pleas	se call:	
David Crespo			at (826-8860
N:	ame of Contact	Person		de & Daytime Telephone Number
Enclosed is a che	ck for the follow	ving amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fe		.75 Filing Fee & tificate 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 Addre Amendment Se Division of Cor P.O. Box 6327	ction porations	Amend Divisio Clifton	Address ment Section n of Corporations Building yecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ROQUES FAMILY PREMIER CONSTRUCTION, INC.

(Name of Corporation as current	ntly filed with the Florida Dept. of State)
P17000050259	
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
Costa Family Premier Construction, Inc.	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Pin i
•	
C. Enter new mailing address, if applicable:	N/A SS T
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	DE H
D. If amending the registered agent and/or registered office ad	ldress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida s	street address)
NI/A	
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	nt:
I hereby accept the appointment as registered agent. I am familian	r with and accept the obligations of the position.
,	
Signature of 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	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>V</u>	Mike Jo	nes ·		
X 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				-	
4) Change				_	
Add				_	
Remove					
5) Change					
Add				-	
				-	
Remove				-	
6) Change				_	
Add				_	
Remove					

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	,
<u> </u>	
	
	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amendment date this document was signed.	s) adoption:	, if other than the
, , ,	June 1, 2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this dee Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(re sufficient for approval.	s)
	e approved by the shareholders through voting groups. The following statem of for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Jun Dated	е 14,2017	
Signature	Roques Costa	
sel	y a director, president or other officer - if directors or officers have not been ected, by an incorporator - if in the hands of a receiver, trustee, or other coupointed fiduciary by that fiduciary)	
	Roques Costa	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	