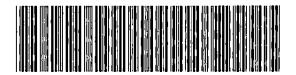


(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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M

R. WHITE JAN 25 2018

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: P1700005274 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ASTRUCTION Grap

Firm/Company unshine Lane E-mail address: (10 be used for future annual report intrification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

Ar	to rticles of Incorporation	18 JAN 25 PH 3: 37
	of	20 111 3. 37
Ox Construct	ion Grosp, In	c Mila
(Name of Corporation	as currently filed with the Florida	Dept. of State)
P170000 (Document	52741 nt Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation	on adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	ooration:	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A professional cor	orporated" or the abbreviation
B. Enter new principal office address, if applicable:	1031 Sin	Shine Lane, Shite 100
(Principal office address MUST BE A STREET ADDRES	ESS) Altanont	e springs FL32714
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1031 SIM	Shine Lane, Stite 10-1
	Nramo	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		name of the
Name of New Registered Agent		
	(Florida street address)	
No. Bullion 100 and	,	(*). · · ·
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Regist	tered Agent:	
I hereby accept the appointment as registered agent. I d	am familiar with and accept the obliga	itions of the position.
6.	CNow Deviation 1 to a 20 t	
Signati	ure of New Registered Agent, if chang	ing

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 Jol	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike_Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		Cromuell Hairis	1031 Sonshine Lane
Add			1031 Senshine Lane Altamonte Springs, FL 3074
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
	
	
	
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an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
	andment if not contained in the amondment itself:
provisions for implementing the amo	endment if not contained in the amendment usen:
orovisions for implementing the amo (if not applicable, indicate N/A)	endment it not contained in the amengment usen:
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provisions for implementing the amo	Endment it not contained in the amendment itsen:

The date of each amendment(s) adoption:	January	28, <u>2018</u>	, if other than the
Effective date <u>if applicable</u> :	re than 90 days after amendme	20, 2018 ont file date)	
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's re	he applicable statutory filing i	requirements, this date	will not be listed as the
Adoption of Amendment(s) (CHECK ON	Œ)		
Li The amendment(s) was/were adopted by the sharehold by the shareholders was/were sufficient for approval.	ers. The number of votes east	for the amendment(s)	
☐ The amendment(s) was/were approved by the sharehol must be separately provided for each voting group en			
"The number of votes cast for the amendment(s)	• •	val	
by))	.,,	
☐ The amendment(s) was/were adopted by the board of a action was not required.		action and shareholder	
The amendment(s) was/were adopted by the incorpora action was not required.	tors without shareholder action	n and shareholder	
Dated 1-22.	18		
Signature	<u></u>		
	ther officer – if directors or of if in the hands of a receiver, iduciary)		
(Typed or	printed name of person signing	g)	
	President (Title of person signing)		