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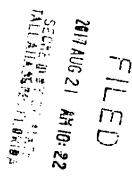
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: WORCESTER CO	ONSTRUCTION INC		
DOCUMENT NUMB	BER: P17000063202			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	itter to the following:		
	LECIÓ DE PAULA			
•		Name of Contact Perso	n	
	BRILLIANT TAX SERVIC	ES CORP		
	<u></u>	Firm/ Company		
	P.O.BOX 19862	Tittii Company		
	, ₁₂	Address		
	SARASOTA, FL 34276			
		City/ State and Zip Cod	e	
brillia	ntaxservices@gmail.com			
		sed for future annual report	notification)	
		,		
For further information	concerning this matter, pleas	se call:		
LECIÓ DE PAULA		941	815-8886	
Name o	f Contact Person	at (941) 815-8886 Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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 Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

WORCESTER CONSTRUCTION INC

WORCESTER CONSTRUCTION INC		<u> </u>
(Name of Corporation as currently	v filed with the Florida Dept, of State	;)
P17000063202		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or " word "chartered," "professional association," or the abbreviation "	Co". A professional corporation nan	or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
(Principal office address <u>myst 112 A 34 Wist Middless</u>)		Par S
		F = T
		(a) (a)
C. Enter new mailing address, if applicable:		St. 30
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		<u> </u>
		_
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the s:	
Name of New Registered Agent	<u></u>	
Name of Sen Neganova agen		
- Harida M	reet address)	·
H W KWC		
New Registered Office Address:	, Florida	(Zip Code)
	(City)	17.117 (17.112)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the p	position.
Signature of Vew	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 Doe		
X Remove	\underline{V}	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	D	JOAO CARLOS CONTAO	8841 WHITE SAGE LOOP	
X Add			LAKEWOOD RANCH, FL	
Remove			34202	
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself. (If not applicable, indicate NA)		g additional Article	Be specific)				
provisions for implementing the amendment if not contained in the amendment itself:							
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The date of each amendment(s) as	option:, if other than the
ate this document was signed.	·•····································
Effective date <u>if applicable</u> :	tno more than 90 days after amendment file date)
Note: If the date inserted in this blocument's effective date on the Do	ock does not meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
☐ The amendment(s) was/were ap must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required. The amendment(s) was/were ad	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
action was not required. Dated 0 9	18/2017 KIEBER P. M. D.
(By a constant)	irector, 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)
	KLEBER PORFIRIO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

the