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| (Requestor's Name)<br>(Address)   |                          |              |
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| (Address)   | 7003022800               | )47          |
| (City/State/Zip/Phone #)  | 08/11/170100800          | 8 **43.75    |
| (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | AUG 1 8 2017<br>S. YOUNG |              |
|   | S. YOUNG                 | . F3<br>. 73 |
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# COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>Trinity Solutions Contractors, Inc.</u>

DOCUMENT NUMBER: P17000063958

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

April O'Neill

Name of Contact Person

Trinity Solutions Contractors, Inc.

Firm/ Company

33870 Blue Star Highway Apt#1007 Address

Addres

Midway, FL 32343

City/ State and Zip Code

oneilla1971@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

April O'Neillat ( 850 )459-9917Name of Contact PersonArea Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

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□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

#### Articles of Amendment to

### Articles of Incorporation

of

### Trinity Solutions Contractors, Inc.

### (Name of Corporation as currently filed with the Florida Dept. of State)

#### P17000063958

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

#### A. If amending name, enter the new name of the corporation:

| N/A   |                        | The new |
|---|------------------------|---------|
| name must be distinguishable and contain the word "corporati<br>"Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or<br>word "chartered," "professional association," or the abbreviation | "Co". A professional c |         |
| B. Enter new principal office address, if applicable:   | N/A                    |         |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   |                        |         |

C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)

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|     |    |   |
| N/A |    |   |
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|     | :  | $\omega$                                    |
|     |    | C-1   |

# D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address;

|            |                          | N/A | <u>Name of New Registered Agent</u>   |
|------------|--------------------------|-----|---------------------------------------|
|            | (Florida street address) |     | _                                     |
| Florida    |                          | N/A | <u>New Registered Office Address:</u> |
| (Zip Code) | (City)                   |     |                                       |
| (2.        | (City)                   |     |                                       |

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar 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)

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 X Remove <u>V</u> Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action <u>Title</u> Address <u>Name</u> (Check One) PS April O'Neill 33870 Blue Star Highway 1) X Change Apt #1007 \_\_\_\_ Add Midway, FL 32343 \_\_\_ Remove 4360 Viewcrest Dr. VTSteven Hall 2) \_\_\_\_ Change Merritt Island, FL 32952 \_\_\_\_ Remove 3) \_\_\_\_ Change \_\_\_\_ Add \_\_\_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add \_\_\_ Remove 5) \_\_\_\_\_ Change \_\_\_ Add \_\_\_ Remove 6) \_\_\_\_ Change \_\_\_ Add \_\_\_\_\_ Remove

# E. If amending or adding additional Articles, enter change(s) here:

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(Auach additional sheets, if necessary). (Be specific)

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F. <u>If an amendment provides for an exchange, reelassification, or cancellation of issued shares,</u> provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

N/A

\_\_\_\_

| The date of each amendment(s) add date this document was signed.                      | ption: <u>August 7, 2017</u>  | , it other than the                            |
|---|---|--|
| Effective date <u>if applicable</u> :   |   |  |
|   | (no more than 90 days after amendment)  | file date)                                     |
| <b>Note:</b> If the date inserted in this blo<br>document's effective date on the Dep | ock does not meet the applicable statutory filing requ<br>artment of State's records. | uirements, this date will not be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )  |  |
| The amendment(s) was/were adop<br>by the shareholders was/were suff                   | ted by the shareholders. The number of votes cast for ficient for approval.           | r the amendment(s)                             |

□ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement* must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

bv

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(voting group)

- □ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- □ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

<u>August 7, 2017</u> Dated Signature

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

April O'Neill (Typed or printed name of person signing)

President

(Title of person signing)