Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CKO CONSULTING AND TAX SERVICES LLC

Account Number : I20220000100 Phone : (321)366-0510 Fax Number : (321)366-0511

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

COR AMND/RESTATE/CORRECT OR O/D RESIGN **EMY CONSTRUCTION GROUP INC**

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TO: Amendment Section

COVER LETTER

Divisio	n of Corpo	rations		
NAME OF	CORPOR	ATION:EMY CONSTRU	OCTION GROUP INC	
DOCUME	NT NUMB	ER: P17000065430	The second secon	
The enclose	ed <i>Articles o</i>	of Amendment and fee are su	bmitted for filing.	
Please retur	n all corresp	oondence concerning this ma	tter to the following:	
		CRISTIANE OLIVEIR	A SILVA	
	-		Name of Contact Person	
CKO CONSULTING A		AND TAX SERVICES LLO	•	
	_	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
		2985 AMBERSWEET	PL	
	-		Address	
		CLERMONT - FLORII	DA - 34711	
	-		City/ State and Zip Cod	e
		CKOFINANCIALSERV	/ICES@GMAIL COM	
	•	E-mail address, (to be us	sed for luture annual report	notification)
For further	information	concerning this matter, plea-	se call	
CRIST	IANE OLIV	YEIRA SH.VA	at (360 0510
	Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is	a check for	the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Fil	ing Fee	☐\$43.75 Filing Fee & Certificate 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)
		ing Address ndment Section		Address Iment Section
		ion of Corporations		on of Corporations
	r.U.	Bax 6327	ind C	entre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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09:51 PM

TO:18506176380

FROM: 3213660511 H 22000 4199 433

Articles of Amendment to Articles of incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) P17000065430 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1000, Florida Statutes, this Florida Profit Corporation adopts the following amendn its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The ne mame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp., "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A" B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) APOPKA - FL - 32712 415 DREAM LAKE DR. APOPKA - FL - 32712
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.100o, Florida Statutes, this Florida Profit Corporation adopts the following amendments Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," Inc.," or "Co.," or the designation "Corp.," "luc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.4" B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) APOPKA - FL - 32712 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) APOPKA - FL - 32712
Pursuant to the provisions of section 607,100o, Florida Statutes, this Florida Profit Corporation adopts the following amendm to Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A" B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) APOPKA - FL - 32712 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) APOPKA - FL - 32712
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(Mailing address MAY BE A POST OFFICE BOX) APOPKA - FL - 32712
(Mailing address MAY BE A POST OFFICE BOX) APOPKA - FL - 32712
APOPKA - FL - 32712
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:
Name of New Registered Agent EVELYN VANESSA RAMOS = F
415 DREAM LAKE DR
415 DREAM LAKE DR **Florida street address** APOPKA APOPKA **Street address** **Popka** **Pop
New Registered Office Address: Profita
(Cuy) (Zip Code)

Check if applicable

L) The amendment(s) is are being filed pursuant to s. 607.0120 (11) (c), F.S.

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; $\tilde{V} = Vice President$; $\tilde{T} = Treasurer$; S = Secretary; D = Director. TR = Trustee; C = Chairman or Clerk; CEO = ChiefExecutive Officer; CEO = 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{Y}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	NATASHA L LOPEZ	10127 BRIDLEWOOD AVE.
Add			ORLANDO, FL - 32825
X Remove			
2) Change	<u> </u>	EVELYN VANESSA RAMOS	415 DREAM LAKE DR.
XAdd			APOPKA, FL - 32712
Remove 3) Change			
Add			202
Remove			2022 DEC
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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		mending or adding add ach additional sheets, if				
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						·——
						
						202
			ing the amendment	eclassification, or cancellation if not contained in the amen		2022 DEC 14
					·	<u>*</u> ::

The date of each amendment(s) ad	antiun:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date woartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopaction was not required.	nted by the incorporators, or board of directors without shareholder action ar	id shareholder
☐ The amendment(s) was/were adop by the shareholders was/were sul	oted by the shareholders. The number of votes cast for the amendment(s). Ticient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(vating group)	
12/13/2022		
Dated		
Signature	volyn Valamos	
(By a di	ector, president or other officer - if directors or officers have not been	
	, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	
	EVELYN VANESSA RAMOS	
-	(Typed or printed name of person signing)	2 02.
:	,	20E
<u>-</u>	(Title of person signing)	<u> </u>
		<u>.</u>
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