| 8506176380       | Page: 2 of 6   | 2021-09-16 20:13:15 GMT  | 13053284774              | From; Yan                |
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| 9/16/21, 3:56 PM | P17  | Division of Corporation<br>Official Department of State<br>Official Department of State<br>Official State<br>Electronic Filing Sover Sheet | 200                      |                          |
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| · .              | lo:<br>Division o<br>Fax Number                          | f Corporations<br>: (850)617-6380  |                          | 23                       |
|                  | From:<br>Account Na<br>Account Nu<br>Phone<br>Fax Number | mber : 120000000145<br>: (305)444-4994   | SERVICE INC.             | 2021 SEP 17              |
| 5 5              |  | oress for this business entity t<br>mailings. Enter only one email a   |                          | E CAN S: 58<br>E FLORID, |
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|  | Page: 3 of 6   | 2021-09-16 20:13:15 GMT   | 13053284774   | From:  |
|--|--|---|---|--|
|  |  | Articles of Amendment<br>to<br>Articles of Incorporation                  | -   | 2021 S   |
| FENCE P.M  | INTING CORP.   | of  |   |  |
|  | (Name of C   | orporation as currently filed with the Flori                              | ida Dept. of State)                                 |  |
| P17000068  | 080  |   |   |  |
|  |  | (Document Number of Corporation (if know                                  | vn)   | 60<br>20<br>20<br>20<br>20<br>20<br>20<br>20<br>20<br>20<br>20<br>20<br>20<br>20 |
|  | he provisions of section 607,100<br>f Incorporation:   | 6, Florida Statutes, this Florida Profit Corpor                           | ration adopts the following an                      | nendment(s) to D   |
| A. <u>If amend</u>   | ling name, enter the new name  | of the corporation:   |   |  |
| E, GOMEZ   | CONSTRUCTION INC   |   | []ı   | e new  |
| "chartered."<br>B. <u>Enter ne</u>                         | Co.," or the designation "Corp.<br>""professional association," or t<br>w principal office address, if ay<br>ffice address <u>MUST BE A STRE</u>     | pplicable:  | ration name must contain th                         | • word<br>   |
|  |  |   |   |  |
|  | ew mailing address, if applicab<br>address <u>MAY BE 4 POST OF1</u>  |   |   |  |
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|  |  |   |   | <del></del>  |
|  | · · ·  | ·   |   | • •  |
|  | ling the registered agent and/o  | r registered office address in Florida, enter<br>gistered office address: | r the name of the                                   |  |
| <u>new regi</u>  |  |   | r the name of the                                   | •••  |
| <u>new regi</u>  | istered agent and/or the new re  |   | the name of the                                     | · · · · ·  |
| <u>new reg</u> i<br><u>Nur</u>                             | istered agent and/or the new re<br>ne of New Registered Agent  | gistered office address:  | r the name of the                                   |  |
| <u>new reg</u> i<br><u>Nur</u>                             | istered agent and/or the new re  | gistered office address:  |   |  |
| <u>new regi</u><br><u>Nur</u><br><u>New</u><br>New Registe | istered agent and/or the new re<br><u>ne of New Registered Agent</u><br><u>Registered Office Address</u> :<br><u>red Agent's Signature</u> , if chan | gistered office address:<br>(Florida street address)<br>(City)            | Florida<br>Florida<br><i>Dig Code</i> ,             |  |
| <u>new regi</u><br><u>Nur</u><br><u>New</u><br>New Registe | istered agent and/or the new re<br><u>ne of New Registered Agent</u><br><u>Registered Office Address</u> :<br><u>red Agent's Signature</u> , if chan | ging Registered Agent:  | Florida<br>Florida<br><i>Dig Code</i> ,             | <br>   |
| <u>new regi</u><br><u>Nur</u><br><u>New</u><br>New Registe | istered agent and/or the new re<br><u>ne of New Registered Agent</u><br><u>Registered Office Address</u> :<br><u>red Agent's Signature</u> , if chan | ging Registered Agent:  | Florida<br>U.g. Code,<br>bligations of the position |  |

□ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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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)

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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 latter 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 vorporation, 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 Snith, SV as an Add.

| Example:<br><u>X</u> Change   | <u>PT</u>       | John Doe    |                 |
|-------------------------------|-----------------|-------------|-----------------|
| X Remove                      | $\underline{v}$ | Mike Jones  |                 |
| <u>X</u> Add                  | <u>SV</u>       | Sally Smith |                 |
| Type of Action<br>(Check One) | Title           | Name        | <u>Addre3</u> s |
| 1) Change                     |                 |             |                 |
|                               |                 |             | •               |
| Remove                        |                 |             |                 |
| 2)Change                      |                 |             |                 |
|                               |                 |             |                 |
| Remove<br>3 ) Change          |                 |             |                 |
| Add                           |                 |             | ·····           |
| Remove                        |                 |             |                 |
| 4) Change                     | _ <del></del>   |             |                 |
| Add                           | · .·            |             | · · ·           |
| Remove                        |                 | · .         |                 |
| 5) Change                     | ·               |             |                 |
| Add                           |                 |             |                 |
| Remove                        |                 |             |                 |
| <li>6) Change</li>            | ····            |             |                 |
| Add                           |                 |             | ·               |
| Remove                        |                 |             |                 |
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|                     |  | onter change(v) hurar                       |   |                            |
| Anach addi          | g or adding additional Articles<br>Wonal sheets, 'if necessary) (F | le specific)                                |   |                            |
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| 1. 16 an amam       | darant maxidar for un exchan                                       | ge, reclassification, or cancellation of is | sued shares                               |                            |
| provisions          | for implementing the amenda<br>applicable, indicate N(A)           | uent if not contained in the amendmen       | t itself:                                 |                            |
| () ///              |  |   |   |                            |
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|                                     |  |  |  |                     |              |             |
| The date of eac<br>date this docume | nt was signed.   | 14 2021  |  | _, if other (       | than the     |             |
| Effective date <u>i</u>             | SEPTEMBER  | (no more than 90 days after amendment)   | file date)                                 |                     |              |             |
| Note: If the dat<br>document's effe | e inserted in this block does r<br>ctive date on the Department o  | not meet the applicable statutory filing req<br>f State's records.   | uirements, this date will i                | not be liste        | d as the     |             |
| Adoption of As                      | iendment(s) ( <u>Cl</u>  | <u>łeck one</u> j  |  |                     |              |             |
| The amendm<br>action was no         |  | r incorporators, or board of directors without   | at shareholder action and s                | hareholder          |              |             |
|                                     | ent(3) was/were adopted by the nolders was/were sufficient for     | esbarcholders. The number of votes cast fo<br>approval.  | or the amendment(s)                        |                     |              |             |
| The amendm<br>must be sept          | ent(5) was/were approved by th<br>irately provided for each voting | ne sharebolders through voting groups. The<br>g group ontified to vote separately on the u                                   | : following statement<br>mendment(s):      |                     | 2021         |             |
| "The r.                             | under of voics cast for the amo                                    | endment(s) was/were sufficient for approva   | 1  |                     | ST3          |             |
| by                                  | (1.0   | ting group)  | . <b>``</b>                                | 0<br>1              | IA LI        |             |
|                                     | SEPTEMBER 15, 202<br>Dated   |  |  | ALLANA BREE FLORIDA | 8<br>8<br>58 |             |
|                                     | selected, by an inc  | sident or other officer – if directors or officer<br>corporator – if in the hands of a receiver, tru<br>y by that fiduciary) | ers have not been<br>istee, or other court | . <b>*</b> **       |              |             |
|                                     | SHABAN   | MALIK  |  |                     |              |             |
|                                     | INCORPO  | (Typed or printed name of person signing)<br>DRATOR  | •  |                     |              |             |
| · · ·                               |  | (Title of person signing)  |  |                     |              |             |
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