Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H17000294011 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.

Account Number : I20050000099 Phone : (813)932-5244 Fax Number : (813)932-3782

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 K3 CONTRUCTION INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
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Electronic filing Menu

Corporate Filing Menu

Help

C. GOLDEN

NOV 09 2017

To:

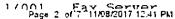
Fav: (850) 617-6380

COVER LETTER

Page 4 of 7 11/08/2017 12:41 PM (((H117000294011 3)))

TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION:	K3 CONTRUCTION INC.			
DOCUMENT NU	NUMBER:				
	cles of Amendment and fee a				
Please return all co	orrespondence concerning th	matter to the following:			
		OMAN ALBANO			
	7	me of Contact Person			
	CONTRACTORS	REPORTING SERVICE, INC			
		Firm/ Company			
	1379	N Nebraska Ave			
		Address			
		mpa, FL 33613			
	C	y/ State and Zip Code			
	E-mail address: (to be use	for future annual report notification)			
For further informa	ation concerning this matter,	lease call:			
		at (813) 932-5244 Area Code & Daytime Telephone Number	_		
Name	of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check	k for the following amount n	de payable to the Florida Department of State):		
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Certified Copy Certificate Certified Copy is enclosed) Certified C (Additional Copy is enclosed)	of Status		
<u>Mailing Ao</u> Amendmer		Street Address Amendment Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			
	· · · · · · · · · · · · · · · · · · ·	Tallahassee, FL 32301			





November 8, 2017

FLORIDA DEPARTMENT OF STATE Division of Corporations

K3 CONTRUCTION INC. 3202 AZALEA DR

HERNANDO BEACH, FL 34607US

SUBJECT: K3 CONTRUCTION INC.

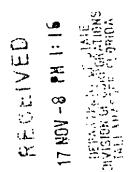
REF: P17000070546

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II FAX Aud. #: H17000294011 Letter Number: 217A00022625



From: Roman Albane

Fax: (813) 932-3782

Fav: 1850; 617-6380 Articles of Amendment

To:

to Articles of Incorporation

2017 NOV -8 All 9: 12

	01		
кз	CONTRUCTION IN	NC. (1)	- III. Furthair
(Name of Corporation :	as currently filed with t	he Florida Dept. of State)	Γ., '-ή' , <i>(t)</i>
	P17000070546		_
(Docume	ent Number of Corporati	on (if known)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this F	Florida Profit Corporation adopt	ts the following
A. If amending name, enter the new name of t	the corporation:		
K3 CONS	ruction inc.		The new
name must be distinguishable and contain th abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe	designation "Corp," "In	c," or "Co". A professional con	" or the rporation
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>E BOX</u>)		
D. If amending the registered agent and/or renew registered agent and/or the new regist		in Florida, enter the name of the	<u>e</u>
New Registered Office Address:	(Florida street	address)	
_		, Florida	
•	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		and accept the obligations of the j	position.

Signature of New Registered Agent, if changing

If amending removed an	nd title, name, and address of each O	fficer and/or Director being add	led:
	itional sheets, if necessary)		
<u>Title</u>	Name	Address	Type of Acti
			□ Add
			□ Remove
			Add
			Remove
			Add
			Remove
			Remove
Y. 16		A()	Remove
	ding or adding additional Articles, end dditional sheets, if necessary). (Be sp		
			Remove
(attach ad	dditional sheets, if necessary). (Be sp	pecific)	
F. If an an provision	nendment provides for an exchange, ons for implementing the amendmen	reclassification, or cancellation	of issued shares,
F. If an an provision	dditional sheets, if necessary). (Be sp	reclassification, or cancellation	of issued shares,
F. If an an provision	nendment provides for an exchange, ons for implementing the amendmen	reclassification, or cancellation	of issued shares,
F. If an an provision	nendment provides for an exchange, ons for implementing the amendmen	reclassification, or cancellation	of issued shares,
F. If an an provision	nendment provides for an exchange, ons for implementing the amendmen	reclassification, or cancellation	of issued shares,
F. If an an provision	nendment provides for an exchange, ons for implementing the amendmen	reclassification, or cancellation	of issued shares,

From: Roman Albano Fax: (813) 932-37 The date of each amendm	782 To: lent(s) adoption: 11/1/20:	Fav: (850) 517-6380	Page 7 of 7 11/08/2017 (1241 PM 00294011 3))
The date of each amend	(date o	of adoption is required)	
Effective date if applicabl	le:		
	(no more than 90 days af	ter amendment file date)	
Adoption of Amendment((s) (CHECK O	NE)	
	/were adopted by the sharehol s/were sufficient for approval.	ders. The number of vot	es east for the amendment(s)
	were approved by the sharehowided for each voting group en		oups. The following statement on the amendment(s):
"The number of vo	tes cast for the amendment(s)	was/were sufficient for a	ipproval
by		.,11	
	(voting group)		
action was not required	/were adopted by the board of /were adopted by the incorpor		
action was not required			
Dated_1	1/06/2017		
Signature	e	er officer – if directors	or officers have not been
;	selected, by an incorporator – appointed fiduciary by that fid	if in the hands of a recei	
	CHR	ISTOPHER KNOX	
	(Typed or pri	nted name of person sign	ning)
		P	
	(Title of person s	igning)	