P1700070993

(Re	equestor's Name)	
(A	ddress)	
(Ad	ddress)	
(Ci	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Br	usiness Entity Name)	
(D	ocument Number)	
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ALLAHASSEE, FLORB

DEC 13 2018
S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Crux Construction	, Inc.	
DOCUMENT NUMI	BER: P17 00007	0993	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Carl Harper		
	Crux Construction, Inc	Name of Contact Persor	1
		Firm/ Company	
	1402 East Kaley Street		
	Orlando, F1, 32806	Address	
		City/ State and Zip Code	2
Carl@	peruxeonstructionine.com E-mail address; (to be us	sed for future annual report	notification)
For further information	i concerning this matter, pleas	se call:	
Carl Harper		386 at (283-7176
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made [payable to the Florida Depa	irtment of State:
□ \$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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 thussee, F1, 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assec, F1, 32301

Articles of Amendment

to

Articles of Incorporation of

Crux Construction	on. Inc
(Name of Corporation as c	currently filed with the Florida Dept. of State)
P17000010993	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion:
N/A	71
	The _newThe _new_rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
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>)	N/A SI TO
	000 00 00 00 00 00 00 00 00 00 00 00 00
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office:	
N/A Name of New Registered Agent	
	lorida street address)
New Registered Office Address:	Florida
tien regimera Office Radiess.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	
i iki eng saksapa nik sippinininan u ki regisiteren ugeni. Tam ja	инны чин ала ассерстве отяданть ој те ромнон.
	
Signature of	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)

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	<u>V</u>	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	V	Oscar D Harper	1402 E Kaley Street
X Add			Orlando, F1, 32806
Remove			
2) Change		_	-
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
(Thurse			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
	· · · · · · · · · · · · · · · · · · ·
	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself;
N/A	
-	

The date of each amendment(s)	11/28/2018 adoption:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :	(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 document's effective date on the l	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	r
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
11/28/20	18	
Dated	Q-LAN	
Signature		
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Carl Harper	
	(Typed or printed name of person signing)	
	DPST	
	(Title of person signing)	