P17000083410

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO	ORPORA'	FION: DAVIS CONSTRU	JCTION CONSULTANTS	INC.			
		R:					
		Amendment and fee are su	bmitted for filing.				
Please return a	ll correspo	ndence concerning this ma	tter to the following:				
	Jos	seph M. Herbert					
			Name of Contact Person	1			
	Norton Hammersley Lopez & Skokos P.A.						
	Firm/ Company						
	18	19 Main St # 610	, ,				
		s riult 10 · 10	Address				
	Sa	rasota, FL 34236					
			City/ State and Zip Code	e			
	iho	rbert@NHLSLAW.com					
		_	sed for future annual report	notification)			
		,	,	,			
For further info	ormation co	oncerning this matter, pleas	se call:				
Joseph M. Her	rbert		941	954-4691			
Name of Contact Person			at (Area Co) de & Daytime Telephone Number			
F==1.4.4 :							
Enclosed is a c	eneck for th	e following amount made	payable to the Florida Depa	artment 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

Articles of Amendment to Articles of Incorporation of

DAVIS CONSTRUCTION CONSULTANTS INC. (Name of Corporation as currently filed with the Florida Dept. of State) P17000083410 (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: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Joseph M. Herbert Name of New Registered Agent 1819 Main St # 610 (Florida street address) Florida 34236 Sarasota New Registered Office Address: 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

Check if applicable

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

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	emove <u>V</u> <u>Mike Jones</u>		
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) x Change	PD	Trever Davis	200 2nd Avenue S. #346
Add			St. Petersburg, FL 33701
Remove			
2) Change	SD	Tom Davis	220 Coquina Bay Drive
X Add			St. Petersburg, FL 33705
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additio (Attach additional sheets, if nece	essary). (Be specific)	<u> </u>			
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If an amendment provides for	an exchange reclassif	ication or cancel	lation of issued s	harec	
provisions for implementing t	the amendment if not o	contained in the a	mendment itself		
(if not applicable, indicate	IV/A)				
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sued Shares:	_				
rever Davis - 900					
om Davis - 100					
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January 1, 2020
The date of each amendment(s) adoption:, if other than the
date this document was signed.
January 1, 2020 Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ 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
by
by
Dated $6/23/2020$ 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)
Trever Davis
(Typed or printed name of person signing)
President/Director
(Title of person signing)