P1700085530

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C. GOLDEN NOV 20 2017

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: M&M JAM CONSTRUCTION INC DOCUMENT NUMBER: P17000085530 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: TATIANA M MENDEZ Name of Contact Person M& M JAM STUCCOINC Firm/ Company 4225 BOGGY CREEK ROAD Address KISSIMMEE, FL 34744 City/ State and Zip Code TMENDEZ@GJCONST.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 301-2522

Area Code & Daytime Telephone Number TATIANA M MENDEZ Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee **■\$**43.75 Filing Fee & □\$43.75 Filing Fcc & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FULFO 2017 NOV 17 PM 1: 16

M& M JAM CONSTRUCTION INC

	s currently filed with the Florida Dept. of State)	•
P1700008 55 30		
(Document N	Number of Corporation (if known)	
arsuant to the provisions of section 607.1006, Florida Statu Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following ame	endmen
. If amending name, enter the new name of the corpora	ation;	
&M JAM STUCCO INC	77	
me must be distinguishable and contain the word "co. Corp.," "Inc.," or Co.," or the designation "Corp.," "Incord "chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbrevi nc," or "Co". A professional corporation name must contai	new iation in the
Enter new principal office address, if applicable:		
rincipal office address <u>MUST BE A STREET ADDRESS</u>	<u>(S)</u>	
	——————————————————————————————————————	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u>,,, , b</u>	
If amending the registered agent and/or registered offinew registered agent and/or the new registered office		
Name of New Registered Agent	NIR	
	•	
	Florida street address)	
1	TOT MILL SIVEEL OLDITESSY	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
w Registered Agent's Signature, if changing Registered	d Apante	
ereby accept the appointment as registered agent. I am fa		
 		
Signature of	of New Registered Agent, if changing	
\parallel		

				ficer/director being removed and title, name, and
address of each Officer (Attach additional sheets			idea:	
Please note the officer/di	rector tit	le by th e first lette	er of the office title:	
Executive Officer; CFO	rrestaen = Chief i	i; 1= tre asu rer; Financial Of ficer	s= secretary; D= Director; 11 . If an officer/director holds m	R= Trustee; C = Chairman or Clerk; CEO = Chief wre than one title, list the first letter of each office
held. President, Treasure	er, Direct	or would b <mark>e</mark> !PTD	l <u>.</u>	
a change, Mike Jones lea	i in ine jo ives the c	cowing manner. corporation, Sally	Currently John Doe is listed as Smith is named the V and S. Th	the PST and Mike Jones is listed as the V. There is hese should be noted as John Doe, PT as a Change,
Mike Jones, V as Remove	, and Sal	ly Smith, SV as a	n Add.	v
Example: X Change	<u>PT</u>	John Doe		
X Remove	Y	Mika Jaras	,\ Q	
_	<u> </u>	Mike Jones	ν/ι	
X Add	<u>sv</u>	Sally Smith	J	
Type of Action	Title	Name		Address
(Check One)				
1) Change		_		
Add		1		
Remove				
Kedrove				
I) Change				
Add				_
Remove				
1)) Change				
Add				
Remove				
4) Channa				
4) Change				
Add				
Remove				
4) Change		- 		
Add				
Remove		 		
Kollove				
4) Change				
		- - 		
Add				
Remove				

Page 2 of 4

amending or adding additional A	Articles, enter change(s) here:
ttach additional sheets, if necessar	ry). (Be specific)
	<u> </u>
	$\lambda \mid A$
	
	
	
	<u> </u>
n amendment provides for an ex	xchange reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	mendment if not contained in the amendment itself:
	ii l
<u> </u>	
	

The date of each amendment(s) adoption: date this document was signed.	NOVEMBER 14,2017	, if other than th
NOVEMBER Effective date if applicable:	i 14,2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will rof State's records.	юt be listed as th
Adoption of Amendment(s)	THECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for	ne shareholders. The number of votes east for the amendment(s) and approval.	
	the shareholders through voting groups. The following statement of group entitled to vote separately on the amendment(s):	
"The number of votes cast for the an	 tendment(s) was/were sufficient for approval 	
	<u></u>	
6	oting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	
11/1 4/20 17 Dated	<u>{</u>	
Signature 100	Leado	
	esident or other officer - if directors or officers have not been corporator - if in the hands of a receiver, trustee, or other court	
	ry by that fiduciary)	
Т	ATIANA M MENDEZ QUINTERO	
·• -	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	