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SECRETAR OF STATE
TALLAHASSEE, FLORIDA

DEC 04 2018 S. YOUNG

COVER LETTER

TO: Amendment Section			
Division of Corporations			
	_		

NAME OF CORPORATION: MLA CONST	<u> 2uction INC</u>
DOCUMENT NUMBER: P170009	5755
The enclosed Articles of Amendment and fee are submitte	ed for filing.
Please return all correspondence concerning this matter to	the following:
ERIKA Can	HERO_
Na	ime of Contact Person ACY SERVILS (C) Firm/ Company
_	1 2-612 Address OCK GA ,30188
Cit	y/ State and Zip Code
E-mail address: (to be used for	future annual report notification) 9 mail. Con
For further information concerning this matter, please call:	
ERIKA Cante Name of Contact Person	Rea Code & Daytime Telephone Number
Enclosed is a check for the following amount made payabl	, , ,
Certificate of Status C	43.75 Filing Fee & S52.50 Filing Fee ertified Copy Certificate of Status dditional copy is nclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

to

	of	
MLA CONSTRUCT	s currently filed with the Florida Dept. of State)	
Dia orona or corporations	Scurrency fried with the Fibrida Dept. of State)	
PITOUUG	5 155	
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Strits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendn	nent(s)
A. If amending name, enter the new name of the corpo	ration:	
	The ne	2547
	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional co rporation name must contain th	on
B. Enter new principal office address, if applicable:		_
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>ss</u>)	
		=
C. Enter new mailing address, if applicable:	26 N	П
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	卫6	O
	· 6 on	,
	08 DA	
D. If a monding the resistance quant and/or resistance	SS an address in Planta areas the same of the	
D. If amending the registered agent and/or registered new registered agent and/or the new registered office.		
Name of New Registered Agent		
Sume of New Registered Agent		
	Florida street address)	
Non- Buristand Office Address	Elavida	
New Registered Office Address.	, Florida	,
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	ed Agent:	
і петену иссері ше арронишені as registerea agent. Тап	jammar wan ana accept the obugations of the position.	

Signature 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:	же, ина за	uy Sman, 57 as an Maa.	
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>	Address
1) X Change	<u>P</u>	Flavio C Dias	302 Cherry Way Saint Johns, FL 3225
Add			Saint Johns, FL 3225
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
) Change			
Add			
Remove			
Change			
Add			
Remove			

	l sheets, if necessa	Articles, enter ch ry). (Be specific,)			
						
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an amendmer	t provides for an	exchange, reclass amendment if not	ification, or cane	ellation of issued	shares,	
if not app:	icable, indicate N/2	<u>amenument ir not</u> 1)	contained in the	amenument use	<u>11:</u>	
				· · · · · · · · · · · · · · · · · · ·		
		· · ·				

The date of each amendment(s) adoption: 1920 S . if other than the date this document was signed. Effective date if applicable: 1900 S (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 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
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
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)
Flavio Dias
(Typed or printed name of person signing)
Vice President.
(Title of person signing)