## P18000005271

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: D BATTON CON	TRACTING, INC.			
DOCUMENT NUM	P18000005271				
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	DAVID BATTON				
	Name of Contact Person				
	D BATTON CONSTRACTING, INC.				
	Firm/ Company				
	563 EDENFIELD ROAD				
	· · ·	Address			
	GREEN COVE SPRINGS, F	FL 32043			
		City/ State and Zip Co	de		
suns	vc0702@yahoo.com				
- Sups	•	sed for future annual repor	t notification)		
	13 man address, (to be a	sed for telling difficult repor			
For further information	on concerning this matter, pleas	se call:			
JESSICA BATTON		904 at (	814-3127		
Name	of Contact Person		ode & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Dep	partment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address  Amendment Section  Division of Corporations		Amer	t Address Idment Section Idmon of Corporations		
P.O. Box 6327		Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)



D BATTON CONTRACTING, INC.

P18000005271	`6
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(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> )	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	d address)
(Fiorida sirei	i duaress)
New Registered Office Address:	. Florida
'	лу) (г.р соце)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	th and accept the obligations of the position.
Signature of New Re	gistered 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>	Address	
I) Change	V	BRENT H. MOODY	820 LANDRETH ROAD	
X Add			GREEN COVE SPRINGS, FL	
Remove			32043	
2) Change	S	JIMMY T. HUGGINS	563 EDENFIELD ROAD	
X Add			GREEN COVE SPRINGS, FL	
Remove			32043	
3 ) Change		<del>.</del>		
Add				
Remove				
4) Change				
Add			<u></u>	
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)	
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16 1	ande-reciassification, or cancellation of issued snares.	
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provisions for implementing the amen	idment if not contained in the amendment itself:	
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provisions for implementing the amen	idment if not contained in the amendment itself:	

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this be document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date woartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
02/05/2018 Dated		
Signature 🕖	O RAW	
(By a di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	DAVID BATTON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	