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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: KERVIN'S CONT	TRACTING, INC.		_	
DOCUMENT NUM	P18000011682			_	
The enclosed Articles	s of Amendment and fee are sul	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	CHERESE PIMENTEL				
		Name of Contact Person	on		
KERVIN'S CONTRACTING, INC.					
		Firm/ Company			
	534 SE ANCHOR LANE				
		Address			
	PORT ST LUCIE, FL 34983			207	
	City/ State and Zip Code				
	kervins_contracting@yahoo.com E-mail address: (to be used for future annual report notification)			- 美元 2	
	E-mail address: (to be us	sed for future aimitian repo	it notification,	1900 R	
For further informati	on concerning this matter, pleas	se call:		2024 NOV 22 MH II: 39 SECRETARY OF STATE TALLAHASSEE, FL	
CHERESE PIMENT	EL	at () <u>812-2002</u>		
Name of Contact Person		Area C	Code & Daytime Telephone N	umber	
Enclosed is a check f	for the following amount made	payable to the Florida De	partment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Ame Divis	et Address ndment Section sion of Corporations Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

KERVIN'S CONTRACTING, INC.			
(Name of C	Corporation as currently	filed with the Florida Dept. of State)	
P18000011682			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06. Florida Statutes, this F	<i>lorida Profit Corporation</i> adopts the follow	wing amendment(s) to
A. If amending name, enter the new nam	ne of the corporation:		
KervPro, Inc.			The new
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Cor" chartered." "professional association," or	p_i "Inc." or "Go". A	ompany," or "incorporated" or the abbrevi professional corporation name must cor	ation "Corp.," ntain the word
B. Enter new principal office address, if	annlicable:	N/A	
(Principal office address MUST BE A STE	REET ADDRESS)		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST Of Discourse) D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent	FFICE BOX) for registered office address: registered office address:		2004 NOV 22 AH 11: 39
	(Florida stre	vet address)	,
New Registered Office Address:		. Florida	Zıp Code)
New Registered Agent's Signature, if chi I hereby accept the appointment as register	anging Registered Agent: red agent. I am familiar w		,
Check if applicable ☐ The amendment(s) is/are being filed put	rsuant 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)

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>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			20PHNOV 22 SECRETAR TALLAHI
Add			LAH.
Remove			العدد المراجب المنتقد المنافق
4) Change			
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)	
N/A		
		_ _
		
		203
		100 Hz
		2074 HOV SECRET
V. If an amandment provides for an exc	hange, reclassification, or cancellation of issued shares,	√ γ () γ ()
provisions for implementing the am	endment if not contained in the amendment itself:	F* -<
(if not applicable, indicate N/A)		SSEE ST
N/A		<u> </u>
		-
		

date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendn	ent file date)
Note: If the date inserted in this blod document's effective date on the Depa	ck does not meet the applicable statutory filing runent of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK_ONE</u>)	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors w	thout shareholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes ca cient for approval.	st for the amendment(s)
☐ The amendment(s) was/were appromist be separately provided for ea	wed by the shareholders through voting groups. sich voting group entitled to vote separately on t	The following statement he amendment(s):
"The number of votes cast fo	r the amendment(s) was/were sufficient for app	roval
by	(voting group)	<u></u> ,"
selected.	ctor, president or other officer – if directors or or by an incorporator – if in the hands of a received fiduciary by that fiduciary)	officers have not been r. trustee, or other court
(THERESE PIMENTEL	
\	(Typed or printed name of person sign TICE PRESIDENT	ing)
	(Title of person signing)	SECRETARY OF STATE TALLAHASSEE, FL