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R. WHITTE JAN 15 2013



COVER LETTER

خ :

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	M & M CONSTRUCTION COMPANY FL					
DOCUMENT NUMBER:	BER: P18000028019					
The enclosed Articles of Amendme	nt and fee are submitted for filing.					
Please return all correspondence cor	ncerning this matter to the following:					
	CLEO MITCHELL					
	Name of Contact Person					
	M & M CONSTRUCTION COMPANY FL					
	Firm/ Company					
	6180 SUN BLVD, APT 104D					
	Address					
	ST PETERSBURG, FL 33715					
	City/ State and Zip Code					
	CLEO.MITCHELL08@GMAIL.COM					
E-mail s	ddress: (to be used for future annual report notification)					
For further information concerning	,					
Name of Contact Per	nson at (727) 417-0340 Area Code & Daytime Telephone Number					
	g amount made payable to the Florida Department of State:					
	5 Filing Fee & Status Secate of Status Certified Copy Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Secti Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on Amendment Section prations Division of Corporations Clifton Building					

Articles of Amendment to Articles of Incorporation

FILED

2019 JAH -7 AM 9: 22

M & M CONSTRUCTION COMPANY FL

(Name of Corpora	ation as currently	filed with the Florida Dept. of :	State)
	P18000028	019	IALLA.IAUSIE, I
(Doct	ument Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this Fi	orida 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 w. "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the	rp," "Inc," or "C	". A professional corporation	d" or the abbreviation name must contain the
B. Enter new principal office address, if applicab			
(Principal office address MUST BE A STREET AL	DDRESS)		
		·	
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	<u>30X</u>)		
	_		
D. If amending the registered agent and/or registered agent and/or the new registered		ss in Florida, enter the name of	the
			
Name of New Registered Agent			
	(Florida stree	t address)	
New Registered Office Address:			orida
	(¢	City)	(Zip Code)
New Registered Agent's Signature, if changing R	legistered Agent:		
I hereby accept the appointment as registered agent	t. I am familiar wi	th and accept the obligations of i	the position.
50	gnature of New Re	vistered 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)

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 <math>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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
l) Change		ANDREW MITCHELL	6001 LEELAND ST S
X Add			ST PETERSBURG
Remove			FL, 33715
2) Change			
Add			
Remove			··· ···
3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u></u>		
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
···	
	
	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, under the indicate of the indicate
(if not applicable, indicate N/A)	adment it not sometimen in the amendment itsen.

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The famust he separately provided for each voting group entitled to vote separately on the ame	ollowing statement endment(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 action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	i shareholder
Dated	
Signature las mitches	
(By a director, president or other officer – if directors or officer selected, by an incorporator – if in the hands of a receiver, trust appointed fiduciary by that fiduciary)	
CLEO MITCHELL	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	