P18000039377

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GIANNI CONSTR	LUCTION INC	
DOCUMENT NUMB	ER: P18000039377		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
ı	ORIOL JARAMILLO		
-		Name of Contact Persor	1
	GIANNI CONSTRUCTION INC		
-	Firm/ Company		
	598 OLD HIGHWAY 17		
-		Address	
	CRESCENT CITY FL 32112		
-	City/ State and Zip Code		
;	supsvc0702@yahoo.com		
-		sed for future annual report	notification)
For further information ORIOL JARAMILLO	concerning this matter, pleas	se call:at (. 559-2498
Name of Contact Person		at (Area Co)de & Daytime Telephone Number
	the following amount made		, ,
■ \$35 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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

GIANNI CONSTRUCTION, INC.	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P18000039377	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
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 MAY BE A POST OFFICE BOX)	7820 HOV -9
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·
(Florida st	treet address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New I	Registered Agent, if changing

Check if applicable

[] The amendment(s) is/are being filed pursuant 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 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office 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. The 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 Chemister Mike Jones, V as Remove, and Sally Smith, SV as an Add.

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>	<u>Addres</u> s
1) Change	8	BRANDON A. DRULARD	134 GOODWIN STREET
X Add			SAN MATEO FL 32187
Remove			
2) Change			
Add			
Remove 3) Change	#- -		
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	iding or adding additional A additional sheets, if necessary,		(e(s) nere.		
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provis	nendment provides for an exions for implementing the an not applicable, indicate N/A)	nendment if not co			es,
					
				-	
					-

	loption:	if other the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed :
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendmer fficient for approval.	nt(s)
	roved by the shareholders through voting groups. The following states cach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(Tomas group)	
selected	rector, president or other officer – if directors or officers have not been a not been an incorporator – if in the hands of a receiver, trustee, or other coed fiduciary by that fiduciary)	
	ORIOL JARAMILLO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	