## P18000040519

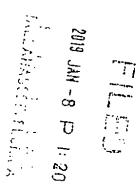
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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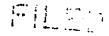
## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION:	Contractors Inc	
DOCUMENT NUME	BER: P18000040519		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Manuel Rosas Flores		
		Name of Contact Person	1
	JJ&J Construction Contracto	rs Inc	
		Firm/ Company	
	4409 Hoffner Ave #282	, and sampany	
	<del></del>	Address	
	Orlando, FL 32812		
		City/ State and Zip Cod	e
Hleo	nstructioncontractors@gmail.	com	
		sed for future annual report	notification)
		,	
For further information	n concerning this matter, pleas	se call:	
Manuel Flores		407	de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation



JJ&J Construction Contractors Inc		2019 Like C
( <u>Name</u>	of Corporation as currently	filed with the Florida Dept. of State) 1: 20
P18000040519		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
		The new
	iation "Corp." "Inc." or "C	"company," or "incorporated" or the abbreviation O" A professional corporation name must contain the
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>		
D. If amending the registered agent an new registered agent and/or the ne		ess in Florida, enter the name of the
Name of New Registered Agent	Manuel Rosas Flores	
name of New Registerea Agent	4409 Hotfner Ave #282	
		et address)
New Registered Office Address;	Orlando	. Florida 32812
m in megmeren office andress.	(0	Cuy) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations 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)

\_ Remove

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 hold. 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.

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>Nam</u>	<u>u</u>		Address	
1) Change	Р	Jose	Erazo		4409 Hoffner Ave #282	
Add					Orlando, FL 32812	
Remove						_
2) Change	<u>V</u>	Mar	vin Morales	<del></del>	4409 Hoffner Ave #282	
Add					Orlando, FL 32812	
X Remove						_
3 ) Change	Р	Man	aiel Rosas Flores	<u>.                                      </u>	4409 Hoffner Ave #282	
X Add					Orlando, FL 32812	
Remove						
4) Change						_
Add						_
Remove						-
5) Change			<del></del>	<del></del>		_
Add						
Remove						_
6) Change		_				_
Add						

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
, · · • · · · · · · · · · · · · · · · ·		
	***	
f an amendment provides for an eych	ange, reclassification, or cancellation of is	cued chares
provisions for implementing the ame (if not applicable, indicate N/A)	idment if not contained in the amendment	itself:
(i) ma apparame, marcine (17.11)		
···		

	01/04/19	
The date of each amendment(s) adoption date this document was signed.	:	, if other than the
Effective date if applicable:		
	tno more than 90 days after amendment file date)	· ·
Note: If the date inserted in this block do document's effective date on the Departmen	es not meet the applicable statutory filing requirements, to f State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amend for approval.	ment(s)
	y the shareholders through voting groups. The following so ting group entitled to vote separately on the amendment(s,	
	amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
	the board of directors without shareholder action and share	eholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and sharehold	ler
1/4/19 Dated		
W.		
Signature///a	I have her	
(By a director, selected, by an	president or other officer – if directors or officers have not incorporator – if in the hands of a receiver, trustee, or othe ciary by that fiduciary)	
Manue	l Rosas Flores	
	(Typed or printed name of person signing)	
Preside	ent	
	(Title of person signing)	,