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SSURETARY OF STATE

C. GOLDEN SEP 1 1 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: HILEX CONSTRU	JCTION INC			
DOCUMENT NUMI	BER: P18000051062				
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.			
Please return all corre	spondence concerning this mat	ter to the following:			
	THOMAS MILLER				
		Name of Contact Person	I		
	FOCUS 9 ENTERPRISES LLC				
		Firm/ Company			
	601 DELTONA BLVD STE 102				
	Address				
	DELTONA, FL 32725				
		City/ State and Zip Code	3		
TMI	LLER@FOCUS9ENTERPRIS	SES.COM			
	-	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
THOMAS MILLER		at (<u>386</u>	259-9900		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depo	irtment of State:		
□ \$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)		
Am Div P.C	iling Address endment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Ameno Divisio Cliftor 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

FILED

HILEX CONSTRUCTION INC

2018 SEP -4 PM 2: 12

(Name of Corporation as currently filed with the Florida Dept. of State) No TARY OF STA
P18000051062 TALLAHASSEE, F
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
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)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent
(Florida street address)
New Registered Office Address:
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
Thereby accept the appointment as registered agent.—Lam 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)

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>	<u>John Doe</u>			
X Remove	\underline{V}	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) X Change	P	MARK PASSERO	601 DELTONA BLVD STE 102		
Add			DELTONA, FL 32725		
Remove					
2) Change	ST	ENDRE BANFI	601 DELTONA BLVD STE 102		
X Add			DELTONA, FL 32725		
Remove					
3) Change	VP 	ZOLTAN KURUCZ	601 DELTONA BLVD STE 102		
XAdd			DELTONA, FL 32725		
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change			<u> </u>		
Add					
Remove					

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	• • •
	
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F. If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
N/A	

) adoption: 06/05/2018	, if other than the
late this document was signed.	ov (na 1001 e	
Effective date <u>if applicable</u> :	06/05/2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the locument's effective date on the	is block does not meet the applicable stanuory filing requirements, this c Department of State's records.	fate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	(s)
	approved by the shareholders through voting groups. The following staten for each voting group entitled to vote separately on the amendment(s):	nem
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and sharehold adopted by the incorporators without shareholder action and shareholder	ler
	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other countries.	
	ointed fiduciary by that fiduciary)	
	MARK PASSERO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	