P18000061938

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COVER LETTER

FORETARY OF STATE OF CORPORATION

TO: Amendment Section Division of Corporations

288 JUL 30 MII: 12

NAME OF CORPO	RATION: ALPHA CONSTR	RUCTION & GENERAL S	SERVICE CORP
DOCUMENT NUMI	BER: P18000061938		<u></u>
The enclosed Articles	of Amendment and fee are su	ebmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	DA SILVA, ERISSON		
		Name of Contact Perso	n
	ALPHA CONSTRUCTION & GENERAL SERVICE CORP		
		Firm/ Company	
	4263 LOSCO RD # 1011		
		Address	
	JACKSONVILLE, FL, 3225	57	
		City/ State and Zip Cod	le
SAFE	EWAYMULTISERVICE@H	OTMAIL.COM	
4	E-mail address: (to be us	sed for future annual report	notification)
For further information DA SILVA, ERISSO	n concerning this matter, pleas	904	810-8102
	of Contact Person	at (_)
	r the following amount made		ode & Daytime Telephone Number 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	Ameno Divisio Cliftor 2661 E	Address dment Section on of Corporations n Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

DEVISION OF CONSUPARISE

2818 JUL 30 AM 11: 19

ALPHA CONSTRUCTION & GENERAL SERVICE CORP

(Name of Corporation	as currently filed with the Florida Dept. of State)
P18000061938	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
	The new "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe l hereby accept the appointment as registered agent. l a	ered Agent: om familiar with and accept the obligations of the position.
Signatu	ure 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>	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	P	BERNARDO, PATRICIA	4263 LOSCO RD # 1011
Add			JACKSONVILLE, FL, 32257
X Remove			
2) Change	Р	DA SILVA, ERISSON	4263 LOSCO RD # 1011
X Add			JACKSONVILLE, FL, 32257
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			*******
Remove			
5) Change			
Add			
Remove			
6) Change	-10	_	
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/4)	. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
provisions for implementing the amendment if not contained in the amendment itself:	(Mach daditional sites, y necessary). (Be specific)	
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(if not applicable, indicate N/A)	provisions for implementing the amendment if not contained in the ame	endment itself:
	(if not applicable, indicate N/A)	
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	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days a)	fier amendment file date)
Note: If the date inserted in this block does not meet the applicable stat document's effective date on the Department of State's records.	autory filing requirements, 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 by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voti must be separately provided for each voting group entitled to vote separately	
"The number of votes east for the amendment(s) was/were sufficient	ent for approval
by	
by(voting group)	
■ The amendment(s) was/were adopted by the board of directors without action was not required.	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without share action was not required.	cholder action and shareholder
Dated 7/28/18 Signature Parado	
Signature Fundo	
(By a director, president or other officer – if d	
selected, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	of a receiver, trustee, or other court
(Typed or printed name of	abra
(Typed or printed name of	person signing)
prinolent	
(Title of person	signing)