P 180000 W3589

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2018 AUG - 2 AM II: 4:

C. GOLDEN AUG - 7 2018

COVER LETTER

Division of Corporations NAME OF CORPORATION: CMC Pro INC P1800006358 DOCUMENT NUMBER: __ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Address For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □S43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301

is enclosed)

Articles of Amendment Articles of Incorporation

FILED

2018 AUG -2 AM 11: 45

CMC Pro TNC

(Name of Corporation as currently filed with the Florida Dept. of Spite) FIG. TARY OF STATE TALLAHASSEE, FL P180000 63589
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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 MUST BE A STREET ADDRESS) 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) New Registered Agent's Signature, if changing Registered Agent: I hereby 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)

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 De	<u>ne</u>			
X Remove	\underline{V}	Mike Jo	<u>ones</u>			
X Add	<u>sv</u>	Sally St	<u>nith</u>			
Type of Action (Check One)	Title		<u>Name</u>			<u>Addres</u> s
1) Change	P/5		Cleiber M	Corro L	opez	- 2871 5w 136th (
Add	•					Plami, F1 33175
Remove					_	
2) Change					_	
Add					_	
Remove					_	
3) Change		_			_	
Add					_	
Remove					_	
4) Change					_	
Add					_	
Remove						
5) Change		_			_	
Add					_	
Remove						
6) Change					_	
Add					_	
Remove					_	

	nding or adding additional additional additional sheets, if necessor	ry). (Be specific)	 -		
					
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	<u></u>				
					-
					
<u>ran a</u>	mendment provides for an ions for implementing the	exchange, reclassif	<u>ication, or cancell;</u> contained in the or	ation of issued share	<u>·S.</u>
(i)	not applicable, indicate N/	<u> </u>	omanica in the at	nenament usen.	
•	• •				
					
					
					
					

The date of each amendment(s) adoption:	, if other than 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 block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 07/30/2018	
Signature CIEIBER CORRO	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
Cleiber M Corn Lopez (Typed or printed name of person signing)	
Dear to t	
(Title of person signing)	
(time or become about)	