P180000072829

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O Kinse;

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ML. OUNEY COINSTRUCTION INC

DOCUMENT NUMBER: P18000072829

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person

Firm/ Company

430| N. WICKHAM RD

Address

MELBURNE FL 32935

City/ State and Zip Code

MEL BOURNETAL SLAYER & GNAIL COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEVEN CARUSO at (321) 259770 Y

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

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 Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

ML. OLNEY CONSTRUCTION INC.		
ML. OLNEY CONSTRUCTION / NC. (Name of Corporation as currently filed with the Florida Dept. of State)		
P18000072829		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the folits Articles of Incorporation:	llowing amendn	ient(s) to
A. If amending name, enter the new name of the corporation:		
	The ne	W.
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name word "chartered," "professional association," or the abbreviation "P.A."	the abbreviation	on
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)		
	 ≥	
	15 TS	- expl
D. If amending the registered agent and/or registered office address in Florida, enter the name of the		, essen
new registered agent and/or the new registered office address:	图 3	1
Name of New Registered Agent	SSS P	
	Thurst of	
(Florida street address)	<u>一声語</u> 33	,
New Registered Office Address:, Florida		_
(City)	(Zip Code)	
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 pos-	ition.	
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</u>	<u>1 Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	NP	BRYAN LEVY	2050 TIBURON LA
X Add		•	MELBOURNE FL
Remove			32940
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			<u>-</u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			· · · · · · · · · · · · · · · · · · ·
- Remove			

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	_ _
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/A)	
	

The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Department	es not meet the applicable statutory filing requirements tof State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for	the shareholders. The number of votes cast for the ame for approval.	ndment(s)
	y the shareholders through voting groups. The following ting group entitled to vote separately on the amendmen	
	mendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted by taction was not required.	the board of directors without shareholder action and sh	nareholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareh	older
Dated6/12	119	
Signature	oresident or other office - if directors or officers have r	and barra
selected, by an i	incorporator – if in the hands of a receiver, trustee, or o	ther court
appointed fiduc	iary by that fiduciary)	
	MARTIN LEVY (Typed or printed name of person signing)	
	PRESIDENT	
	() title of person signing)	