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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MAO CONSTRU	ICTION SERVICES CORI)
DOCUMENT NUMB	D18000076034		
The enclosed Articles	of Amendment and fee are s	ubmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	DEVORA CRUZ		
-		Name of Contact Perso	n
	AMBAR FINANCIAL SER	VICES CORP	
-		Firm/ Company	
	1897 PALM BEACH LAKI	ES BLVD S-207	
Address			
	WEST PALM BEACH FL	33409	
-		City/ State and Zip Cod	e
DEVO	DRACRUZ@BELLSOUTH.	አ1ሮም	
	Ŭ	sed for future annual report	
	L-man address. (10 be ti	sed for future annual report	notification)
For further information	concerning this matter, plea	se call:	
DEVORA CRUZ		at (318-8453
Name o	Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
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

MAO CONSTRUCTION SERVICES CORP

(Name of Corporati	on as currently	filed with the Florida De	ept. of State)	
P18000076034					
(Docum	ent Number of	Corporation (if known)	<u> </u>		
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	Statutes, this I	Florida Profit Corporation	adopts the fo	ollowing a	mendm
A. If amending name, enter the new name of the co	rporation:				
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	" "Inc," or "(lo". A professional corpe	porated" or oration name	The abbreness must con	eviatio
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	: PRESS)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>V</u>)			<u> </u>	19
					0CT - 7 P
 If amending the registered agent and/or register new registered agent and/or the new registered of 	ed office addre	ss in Florida, enter the na	ame of the		₽4 9 9
Name of New Registered Agent	mee address.			<u> </u>	8: 03
	(Florida stre	et address)			
New Registered Office Address:			. Florida		
	(0	City)		(Zip Code	·)
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent.	stered Agent: am familiar wi	th and accept the obligatio	ons of the pos	ition.	
Signa	ture of New Res	zistered Agent, if changing			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, 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:

 $P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CE. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of <math>\epsilon$ 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 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 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	VP	PEDRO LUIS ROMERO	10110 SW CHADWICK DR	
Add			PORT SAINT LUCIE	
X Remove			FL 34987	
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	ry). (Be specific)
	
	
	
	
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If an amendment provides for an e	exchange, reclassification, or cancellation of issued shares,
provisions for implementing the a	amendment if not contained in the amendment itself:
If an amendment provides for an e provisions for implementing the a (if not applicable, indicate N/A	amendment if not contained in the amendment itself:
provisions for implementing the a	amendment if not contained in the amendment itself:
provisions for implementing the a	amendment if not contained in the amendment itself:
provisions for implementing the a	amendment if not contained in the amendment itself:
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provisions for implementing the a	amendment if not contained in the amendment itself:
provisions for implementing the a	amendment if not contained in the amendment itself:

The date of each amendment(s) a date this document was signed.	doption:, if oth
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be lis epartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
· · · · · · · · · · · · · · · · · · ·	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes case	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
■ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
08/06/201	9
DatedSignature	
(By a c	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	MARCELINO A OQUENDO
	(Typed or printed name of person signing)
	PRESS
	(Title of person signing)