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(Re	questor's Name)	
(Add	dress)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	Certificates of	Status
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Special Instructions to	Filing Officer:	
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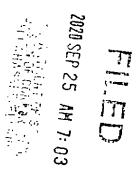
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FRM CONSTRUC	TION INC	·
DOCUMENT NUMB			
The enclosed Articles of	f Amendment and fee are sub	omitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
F	ILORIDALMA ROSELIA M	ORALES VELASQUE	Z
		Name of Contact Pers	son
F	RM CONSTRUCTION INC	•	
_		Firm/ Company	
(	328 FORTUNE LN		
_		Address	
i	APOPKA, FL, 32712		
-		City/ State and Zip Co	ode
1	WILDERLOPEZ60@YAHOO.COM		
-	E-mail address: (to be us	ed for future annual repo	ort notification)
	concerning this matter, pleas		200 0107
	LIA MORALES VELASQU	at (	
Name of Contact Person		Area (	Code & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida De	epartment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. 1	ng Address Idment Section Idment Sec	Ame Divi: The 241:	et Address ndment Section sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 shassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	ly filed with the Florida Dept. of State)
FRM CONSTRUCTION INC	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	N/A
	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	N/A
	N/A
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address:  N/A	
Name of New Registered Agent  N/A	
	reet address)
New Registered Office Address:	, Florida <sup>N/A</sup>
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar  Signature of New F	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	FLORIDALMA R. MORALES	6328 FORTUNE LN
Add			APOPKA, FL, 32712
X Remove			
2) Change	P	FLORIDAUM ROSELIA THORNES USCASCRUEZ	6328 FORTUNE LN
X Add			APOPKA, FL, 32712
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Ramova			

	g or adding additional Articles, enter c tional sheets, if necessary). (Be specifi	c)		
N/A				
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			-	
<u>.</u>				
. If an amend	Iment provides for an exchange, reclast for implementing the amendment if ne	ssification, or cancellation	on of issued shares,	
(if not	applicable, indicate N/A)	or contained in the and	noment usen.	
!/A				
		<del></del>		
			- u +/1- ±	
	71.55.		, , , , , , , , , , , , , , , , , , , ,	•

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
09/20/2020	
Effective date if applicable:	re than 90 days after amendment file date)
(no mo	winan 90 days after amenament fae date)
<b>Note:</b> If the date inserted in this block does not meet document's effective date on the Department of State's r	he applicable statutory filing requirements, this date will not be listed as the ecords.
Adoption of Amendment(s) (CHECK O	<u>NE</u> )
The amendment(s) was/were adopted by the incorpor action was not required.	ators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sharehol by the shareholders was/were sufficient for approval	·
☐ The amendment(s) was/were approved by the shareho must be separately provided for each voting group each	
"The number of votes east for the amendment(s	) was/were sufficient for approval
by	<b>,"</b>
by(voting group	oj
SEPTEMBER 20, 2020	
SEPTEMBER 20, 2020 Dated	
Signature Floridating Morali	<i>S</i> '
(By a director, president or of selected, by an incorporator appointed fiduciary by that	sther officer – if directors or officers have not been – if in the hands of a receiver, trustee, or other court fiduciary)
FLORIDALMA RO	SELIA MORALES VELASQUEZ
(Typed o	r printed name of person signing)
PRESIDENT	
(Title of	person signing)