## P180000 91237

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	-
Certified Copies	_ Certificates of	Status
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: <u>Leiylea</u>	Construct	ion coip
DOCUMENT NUMBE	r: <u>P/4000</u>	09/237	
	"Amendment and fee are su		
Please return all corresp	ondence concerning this ma	tter to the following:	
_	Rudy	Correa Name of Contact Person	Penin
		Firm/ Company	<u> </u>
-	19018 Ca	mo mo	assachusetts Ave
_	Lynn	City/ State and Zip Cod	assachusetts Ave orida 32444
	E-mail address: (to be us	se call:	notification)
	Contact Person	at (	de & Daytime Telephone Number
	he following amount made		
	□\$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)
Amen Divisi P.O. I	ng Address dment Section on of Corporations 30x 6327 assec, FL 32314	Ameno Divisio The C	Address Iment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P14006091237	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment its Articles of Incorporation:	ıt(s) to
A. If amending name, enter the new name of the corporation:	
Correas Brothers construction corp The new	
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 <u>MUST BE A STREET ADDRESS</u> )	
<u></u>	
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:, Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	

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: <u>X</u> Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P/VP	Yohidy Abieu	
Add			
_ <u>/</u> _ Remove		4	
2) Change		Budy lorrea	1818 massachusetts Ave
_ <b>_</b> X_ Add			Lynn Haven Florida
Remove 3 ) Change			37 444
Add			<del></del>
Remove			
4) Change			212
Add			2121; CCT
Remove			<u> </u>
5) Change			<del></del>
Add			-
Remove			27
6) Change			
Add			
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
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/A)	
	·

The date of each amendment(s) adoption:	10-31-2024	, if other than the
date this document was signed.		
Effective date if applicable:		
(no i	nore than 90 days after amendment file date)	
Note: If the date inserted in this block does not med document's effective date on the Department of State'	et the applicable statutory filing requirements, this date is records.	will not be listed as the
Adoption of Amendment(s) (CHECK	ONE)	
The amendment(s) was/were adopted by the incorpaction was not required.	orators, or board of directors without shareholder action	and shareholder
The amendment(s) was/were adopted by the sharely by the shareholders was/were sufficient for approx	holders. The number of votes cast for the amendment(s) ral.	ı
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group	cholders through voting groups. The following statement of entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendmen	n(s) was/were sufficient for approval	
by(voting gr		202
(voting gr	oup)	S S
Dated 10 - 3	1-2024	$\frac{\omega}{2}$
ar and a second and a second are	1-2014 Ja	2024 CCS 31 PG
Signature	wother officer - if directors or officers have not been	
	tor - if in the hands of a receiver, trustee, or other court	10
appointed fiduciary by th	at fiduciary)	~
Rudu	Pollea	
(Typed	lor printed name of person signing)	
	P	
(Title	of person signing)	<u>.</u> -