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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LCR CONSTRUC	CTION OF JUPITER INC		
DOCUMENT NUME				
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	EDGAR ARMANDO ARC	ILA		
		Name of Contact Perso	n .	
	XACTO TAX SERVICES 1	.LC		
		Firm/ Company		
	810 SW GLENVIEW COUL			
		Address	<del>.</del>	
	PORT ST. LUCIE. FLORID	A 34953		
		City/ State and Zip Cod	c	
xactot	ax@gmail.com		,	
	~~	sed for future annual report	notification)	
		·		
For further information	concerning this matter, pleas	se call:		
Edgar Armando Arci	la	772	834-1190	
Name (	of Contact Person	\ <u>-</u>	de & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
	ling Address adment Section		Address Iment Section	
Divi	sion of Corporations	Division of Corporations		
P.O. Box 6327 Tallahassee FL 32314			Building Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

(Name of Corporation as current	ly filed with the Florida Dept. of State)			
18000092933				
(Document Number of	of Corporation (if known)			
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporation adopts the fol	lowing a	ımendn	nent(s) t
. If amending name, enter the new name of the corporation:				
		Т	he ne	7547
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or cord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name	the abb	reviatio	on
Enter new principal office address, if applicable:	2781 SW ENSENADA TERRACE			
Principal office address MUST BE A STREET ADDRESS	PORT ST. LUCIE, FL 34953			
				-
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2781 SW ENSENADA TERRACE			
(maining address ( <u>maining page</u> )	PORT ST. LUCIE, FL 34953		<del>3</del> 35	
		<u>-2</u>	2	=
. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres		77.7	79.	TED
Name of New Registered Agent		1, -	1:03	
.411 + 1	reet address)			
(l·lorida st				
(r torida st  New Registered Office Address:	, Fłorida			

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>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally Si	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				<del></del>
2) Change				
Add		-		
Remove				
3 ) Change				
Add		_		
Remove				
<i>a</i>				
4) Change		-		
Add				
Remove				
5) Change		_		
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Remove				<del></del>
6) Change	<del></del>			
Add				
Pamova				

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)		
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	1 10 .1		
an amendment provides for an exchain royisions for implementing the amend	ige, reciassification, or cancella ment if not contained in the an	tion of issued shares, lendment itself:	
(if not applicable, indicate N/A)			
<del></del>			_

The date of each amendment(s) adoption:
Effective date if applicable:
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 not be listed as document's effective date on the Department of State's records.
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 east 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.
NOVEMBER 14TH, 2018 Dated
Signature
Signature  (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)
LUIS C. RUIZ
(Typed or printed name of person signing)  (Typed or printed name of person signing)
(Title of person signing)