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(Re	questor's Name)	
bA)	dress)	
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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

Division of Corpo	orations			
NAME OF CORPOR	RATION: Bluewo	xter Coughn	uction Solution	of Sebarria
DOCUMENT NUME	BER: P 18	000101621		tuc
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Nakio	Name of Contact Person	[ler	
	Bluewater	Firm/ Company	Solutions of	- Se bastain
	4548 Can	and Rd		Fu
	n 1	Address	- a 2: t	
	Mellow	City/ State and Zip Code	2939	
	Nakiaisrae	ded for future annual report	com	
	iz-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		İ
a N.				
No			, 408-6897	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	ſ
Enclosed is a check fo	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)	

Mailing Address

TO: Amendment Section

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

	ion as currently filed with the Florida Dept. of State)
Julyoter Construction Solutions	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida is Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s)
a. If amending name, enter the new name of the co	
	The new corporation," "company," or "incorporated" or the abbreviation of "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
3. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	2 T T T T T T T T T T T T T T T T T T T
If amending the registered agent and/or register new registered agent and/or the new registered agent.	red office address in Florida, enter the name of the
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Office Address: New Registered Agent's Signature, if changing Registered agent.	(City) (Zip Code)
Signe	ature of New Registered Agent, if changing

If amending the Office address of each Office (Attach additional shee Please note the officer/P = President; V = Vic. Executive Officer; CFG held. President, Treasu Changes should be not a change, Mike Jones of Mike Jones, V as Remo	er and/or E ets, if necess (director tite the Presiden O = Chief in trer, Direct ted in the followers the c	Director being adde sary) It by the first letter of the Treasurer; S= Financial Officer. If or would be PTD. Illowing manner. Curporporation, Sally Sn	d: of the office title Secretary; D= If an officer/dir arrently John L nith is named t	e: = Director: TR= Tri vector holds more th Doe is listed as the P	ustee; C = Chair, an one title, list PST and Mike Jon	man or Clerk; the first letter es is listed as t	CEQ = Chief of each office he V. There is
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)	Title	<u>Name</u>			<u>Addres</u> s		
1) Change	S	Fre	en(ois	Pelleties	4548	(ana	rd Rd
\nearrow Add					Welbar	me fc	3 2934
Remove							1
2) Change		_			_		1
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3) Change		_					<u> </u>
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The date of each amendment(s) adoption:	, if other than the
date this document was signed. 12 / 27/18	
Effective date if applicable: (no more than 90 days after amendment file date)	<u>_</u>
(no more than 90 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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)	1
☐ 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.	
Dated 12/27/18 Signature 12/28	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporato – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Wakia I- Geller	
(Typed or printed name of person signing)	
President	
(Title of person signing)	