P1800019

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2022 JUL 18 AH 10: 36

A. BUTLER
JUL 18 2022



COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPO	RATION: MASONRY INC.	OF NF			
DOCUMENT NUM	P18000102119	·			
The enclosed Articles	of Amendment and fee are sub	omitted for filing.			
Please return all corre	espondence concerning this mat	ter to the following:			
	Michael Hettinger				
	MACONINA INC. OF ALL	Name of Contact Persor			
	MASONRY INC. OF NF				
	703 East Tennessee Street	Firm/ Company			
	Address				
	Tallahassee, Florida 32308				
	City/ State and Zip Code				
	mike@masonryinc.net				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	on concerning this matter, pleas	e call:			
Michael Hettinger		850 at (251-6621		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made p	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□\$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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2022 JUL 18 AM 10: 54 MASONRY INC. OF NE (Name of Corporation as currently filed with the Florida Dept. of State) P18000102119 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: NA 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." NA B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: NA (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: NA Name of New Registered Agent (Florida street address) NA New Registered Office Address: (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am 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: 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	V	Samuel Hettinger	711 East Tennessee Street
X Add	 -		Tallahassee, Florida 32308
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

E. <u>If an</u> (Atta	ending or adding additional Articles, enter change(s) here: h additional sheets, if necessary). (Be specific)
NA	
-	
-	
F. <u>If an</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
NA	ty not appreciate, material confi
INA	
•	

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	July 1, 2022	, if other than the
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file dat	re)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without share	cholder action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the a ufficient for approval.	mendment(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The follow reach voting group entitled to vote separately on the amendm	ving statement ent(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
7/18/202	2	
Dated		
Signature	Much	
(By a select	director, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, onted fiduciary by that fiduciary)	
	Michael Hettinger	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	