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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

C. Stephens Construction Management . Inc 1800 103 113 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CAUSS G. Stephens
Name of Contact Person C. Stepless Construct Mugener 2231 Sw Chulotte St. AACA014 FL 34266 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$43,75 Filing Fee & ☐ \$35 Filing Fee ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment** to Articles of Incorporation of

	FISH MANAGEMENT, INC.
	s currently filed with the Florida Dept. of State)
	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Staits Articles of Incorporation:	ntutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corpo	pration:
	The new
name must be distinguishable and contain the word "corpo "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviati	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRE.</u>	2231 Sw Charlotto St. ABOADIA. FL 34266
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2231 Sw Chantotte St. Arcapia, FL 34266
D. If amending the registered agent and/or registered onew registered agent and/or the new registered office	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
My heganica Office frames.	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
Signature	e 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.

<u>X</u> Change	PT John D	<u>oe</u>	
X Remove	V Mike J	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Chaistopha J Steph	Ancysia, FL 34266
Add			Ancasia FL 34266
Remove  2) X Change	<u>P</u>	CALES G Stephen	2231 Sw (mals HE 67) ARCADIA, FL 34266
Add			ARCADIA, FL 34266
Remove 3) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	
· · · · · · · · · · · · · · · · · · ·		
		<del></del>
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<u> </u>		
in amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
<u>rovisions for implementing the ame</u>	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each ameπdment(s) adoption:	, if other than
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date	)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	its, this date will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without sharel action was not required.	nolder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the an by the shareholders was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follows must be separately provided for each voting group entitled to vote separately on the amendment	_
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by UNANIMOUS APPLOOA!	
(voting group)	
Signature  (By a director, president of other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or	
appointed fiduciary by that fiduciary)	
CHNIS I STEDHENS	
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	

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