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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: From T	The Growna	1 00 Coustructi	on Son
DOCUMENT NUMBE	er: P1900000	5108		
	f Amendment and fee are su			
Please return all corresp	ondence concerning this mat	ter to the following:		
_	Louis R	MYW 1 News Name of Contact Person	· · · · · · · · · · · · · · · · · · ·	
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	E-mail address: (to be us	HINKNE 10 S. ed for future annual report	مسینون کے ہے۔ محت الرت موج (notification	
For further information	concerning this matter, pleas	e call:		
Lus I	1411/12-C	at ( STO	577 6846	
Name of	Contact Person	Area Cor	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment of State:	
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ng Address dment Section		Address ment Section	

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to

## Articles of Incorporation

 $\alpha f$ 

	as currently filed with the Florida Dept. of State) 0 17
P1900005105	as currently filed with the Florida Dept. of State) 9 17
<del></del>	Number of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Sta s Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(
. If amending name, enter the new name of the corpo	<del></del> _,
From The Graved Up Con	Sometion." "company," or "incorporated" or the abbreviation
ame must be distinguishable and contain the word 'Corp.," "Inc.," or Co.," or the designation "Corp," 'vord "chartered," "professional association," or the abb	"Inc." or "Co". A projessional corporation name must contain the
<ol> <li>Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u></li> </ol>	<u>(SS)</u>
2. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
2. If amending the registered agent and/or registered	
new registered agent and/or the new registered off	ice address.
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(Florida street address), Florida

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:

 $P = President; V \neq Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer, If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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:	, ина жа	iy Smun, e	sv as un Haa,			
$\Sigma$ Change	<u>PT</u>	John Do	<u>e</u>			
X Remove	$\underline{\mathbf{V}}$	Mike Jor	<u>nes</u>			
<u>X</u> Add	<u>SV</u>	<u>Sally Su</u>	<u>iith</u>			
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s	
1) Change		_		·		
Add						
Remove						_
2) Change						
Add						
Remove						
3 ) Change		_				
Add						
Remove						
4) Change		_				
Add						
Remove						_
5) Change						
Add						
Remove						
6) Change						
Add		<del>_</del>				
Remove						

(Attach additional sheets, if neces		nge(s) here:		
	sary). (Be specific)			
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		fication, or cancella	<u>tion of issued shares,</u>	
If an amendment provides for	<u>an exchange, reclassi:</u>			
provisions for implementing t	he amendment if not	contained in the an	endment itself:	
provisions for implementing t	he amendment if not	contained in the am	endment itself:	
If an amendment provides for provisions for implementing to (if not applicable, indicate	he amendment if not	contained in the an	endment itself:	
provisions for implementing t	he amendment if not	contained in the an	endment itself:	
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The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:	1-1-1-22/7	
refrective trate is appricable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the Dep	lock does not meet the applicable statutory filing requirements, to partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado by the shareholders was/were sul	pted by the shareholders. The number of votes east for the amend dicient for approval.	lment(s)
	roved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shar	eholder
Phe amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and sharehold	der
Dated	1-19-2019	
Signature ///(By a di	1-16-2-019  Will Puffs  rector, president or other officer - if directors or officers have not	been
selected	<ul> <li>f. by an incorporator – if in the hands of a receiver, trustee, or other ed fiduciary by that fiduciary)</li> </ul>	er court
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	