P19000017936

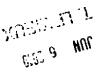
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SUPERB CONSTI	RUCTION COMPANY			
DOCUMENT NUMB	ER: P19000017936				
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	RUBEN TORO				
-		Name of Contact Persor	1		
	RUBEN TORO P.A.				
•		Firm/ Company			
	7901 KINGSPOINTE PKWY STE 31				
•	Address				
	ORLANDO, FL 32819				
•		City/ State and Zip Code	e		
ACCO	OUNTING@RUBENTOROG	CPA.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
RUBEN TORO		at (370-6445		
Name o	RUBEN TORO at (407) 370-6445 Name of Contact Person Area Code & Daytime Telephone Num		de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

to

SUPERB CONSTRUCTION COMPANY

Articles of Incorporation

of

FILED

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P19000017936	2813 HAY 20 P 12: 23
	nent Number of Corporation (if known) ALLANAUSEL LUMBAR Statutes, this Florida Profit Corporation adopts the following amendment(s) to
·	
A. If amending name, enter the new name of the co	rporation:
	The new d "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. 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.	<u></u>
D. If amending the registered agent and/or register	rad office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg	
i nereny accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Sign	ature of New Registered Agent, if changing

'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 <math>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: XChange	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	СО	FLAVIO RIVERA	5804 Plum Pudding Ct.
X Add			Orlando, FL 32821
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		<u> </u>	
Ad d			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	recessory,	(he speegle)
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		
(if not applicable, indicate N/A)	<u>If an amendment provides for an exc</u>	change, reclassification, or cancellation of issued shares,
	figure upplicable indicate V(1)	endment if not contained in the amendment itself:
	1	

	05/15/2019	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	/15/2019	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendme sufficient for approval.	ent(s)
	pproved by the shareholders through voting groups. The following states or each voting group entitled to vote separately on the amendment(s):	'ement
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	; -	
-	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	
05/15/20	10	
05/15/20 Dated	19	
Signature	Itsino2 Voiranto	
· •	director, president or other officer - if directors or officers have not be	
	ted, by an incorporator - if in the hands of a receiver, trustee, or other of	court
арро	inted fiduciary by that fiduciary)	
	ARSINOE NARANJO	
	(Typed or printed name of person signing)	
	PSD	
	(Title of person signing)	