## P190000 38681

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## COVER LETTER

TO: Amendment Section

P.O. Box 6327

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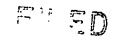
Division of Corporations NAME OF CORPORATION: KING CONTRACTORS GROUP, INC DOCUMENT NUMBER: \_\_\_\_\_\_\_P1900038681 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RONAL ACEUUN O - SAEN Z
Name of Contact Person KING CONTRACTORS GROUP, INC 5465 CURRY FORD RD APT F-104 ORLANDO FL 32812
City/ State and Zip Code Kingcontractors in cking a gmail com
Emplil address: (to be used for future annual report notification) For further information concerning this matter, please call: RONAL ACEITUND-SAEN 2 at ( 360 ) 317 - 3895

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** 

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation



KING CONTRACTORS GROUP, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

2019 SEP 30 PM 3: 01

P 19 <i>00</i> 002	38681		
(Docu	ment Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this F	lorida Profit Corporation	adopts the following amendmen
A. If amending name, enter the new name of the co	orporatioa:		
			The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	v. " "Inc." or "C	lo". A professional corp	rporated" or the abbreviation
B. Enter new principal office address, if applicable	e:		
(Principal office address <u>MUST BE A STREET AD</u>			•
		· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u>9X</u> )		
D. If amending the registered agent and/or registe	red office addre	ess in Florida, enter the n	name of the
new registered agent and/or the new registered	l office address:		
Name of New Registered Agent			
			<del></del>
<del></del>	(Florida stre	et address)	
N 5 102 (II			r.,
New Registered Office Address:		City)	, Florida
		•	•
New Registered Agent's Signature, if changing Re-			
I hereby accept the appointment as registered agent.	l am familiar w	ith and accept the obligati	ons of the position.

Signature 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 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.

X Change	PT John I	<u> Doe</u>	
X Remove	<u>V</u> <u>Mike</u> .	lones .	
X Add	SV Sally S	Տյուն	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u> </u>	MARLEN MURILLO VELASQUE	2 5465 CURRY FORD RD.
Add			APT F104
Remove			ORLANDO, FL 32812
2) Change	P	RONAL J. ACEITUNO-SAENZ	5465 CURRY FORD RD.
$\nearrow$ Add			APT FIOH
Remove			ORLANDO, FL 32A2
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessa	Articles, enter cha iry). (Be specific)	ngeraj nete.			
		<u></u>			
. <u>.                                   </u>					
<u> </u>				<u>.</u>	
			<del></del>		
an amendment provides for an	exchange, reclassi	fication, or cance	llation of issued	shares,	
provisions for implementing the (if not applicable, indicate N	<u>amendment if not</u> (4)	contained in the	amendment itself	<u>[:</u>	
()	,				
<u>.                                    </u>					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable:</u> (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will 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 cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ 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 09/24/19 Signatur & Marten Murillo	
By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
MARIEN HURILLO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	