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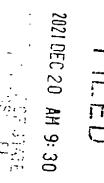
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Office Use Only



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C. BRUMBLEY JAN 1 1 2022

COVER LETTER

TO: Amendment Section ... Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	AATION: Core Cor	struction	Solutions	South Inc.	
DOCUMENT NUMB	DIGARA	43223		_	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Henry	Osagh.	a C		
	Henry Core Constr	Name of Contact Person	lutions Sou	th Inc.	
	5709 Oa	Firm/Company K Lake	Trail		
	Oviedo	Address	32765		
		City/ State and Zip Cod	ahoo, Com	-	
	concerning this matter, pleas				
Henry	OSaghae f Contact Person	at (<u>32/</u> Area Co	de & Daytime Telephone Ni	447 unber	
	the following amount made p				
\$35 Filing Fee	S43.75 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		Ameno Divisio	Address dment Section on 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

Core Construction Solution	tions South	The	
207.0	filed with the Florida Dept. of State)	11,0	<u>. </u>
	43223		
	Corporation (if known)		
	·		
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	torida Profit Corporation adopts the foll	owing amendi	ment(s) to
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation," "co	ompany," or "incorporated" or the abbre		(*11)' ''
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	professional corporation name must co	ontain the wo	ord
спинства, ргодекмопан авхосицион, от те автосмацион 12.4.			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N N		-
)	1 111		_
	ı	20	
C. Enter new mailing address, if applicable:		2/[-
(Mailing address MAY BE A POST OFFICE BOX))EC	I
		20	
	77	C A	m
	لنــــــــــــــــــــــــــــــــــــ	<u></u>	J
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:		္ကို မ	
	~ / / ·	•	
Name of New Registered Agent			
			
(Florida stre	el adaress)		
New Registered Office Address:	City) , Florida	(Zin Code)	-
·		(124) (27)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		tion	
Therety weeks the appearance as registered agent. Tum jammar w	A	RM.	
	NIA		
Cimeron of Vin B			
·	gistered Agent, if changing		
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607,0120 (11) (c)	e) FS		

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; CE() = 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 Doe
X Remove	V Mike Jones
X Add	<u>SV</u> <u>Sally Smith</u>
Type of Action (Check One) 1) Change Add	Title Name Address P, S OSaghal, Henry 5109 Oak Lake 7. Onedo, Fl 32765
Remove 2)ChangeAdd	VP Osaghae, Daivion 1005 San Domingo 1 Orlando, FL 32808
3) Change Add	
Remove 4) Change Add	
Remove 5) Change Add	
Remove 6) Change Add Remove	

If amending or ad (Attach additional:	ding additional sheets, if necessa	Articles, enter c ry). (Bu spacific	hange(s) here: c)			
			<u></u>			
			_			
	11/1/	<u></u>	<u> </u>			_
				· . <u>-</u>		
						
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				<u>-</u>		
If an amendment provisions for im (if not applica	provides for an option of the stable, indicate N/A	amendment if no	sification, or ca ot contained in t	ncellation of iss he amendment	ued shares, itself:	
				<u> </u>		
		NH				

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: December 16, 2	121
(no more than 90 days after amendment f	ile date)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors withou action was not required.	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the an	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	,,
(voting group)	
Dated 12/16/2021	
Signature Signature	
(By a director, president or other officer – if directors or office selected, by an incorporator – if in the hands of a receiver, trus appointed fiduciary by that fiduciary)	rs have not been stee, or other court
(Typed or printed name of person/signing)	€
(Typed or printed name of person signing)	
President	
(Title of person signing)	