P19000081707

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: LVG CONSTRUC	TION CORP				
	BER: P19000081707					
The enclosed Articles	of Amendment and fee are sub	omitted for filing.				
Please return all corre	spondence concerning this mat	ter to the following:				
	ANDRES AVILA					
	Name of Contact Person					
	MULSERV CORP					
		Firm/ Company				
	4711 NW 79TH AVE SUITE	4D				
	Address					
	DORAL FLORIDA 33166					
		City/ State and Zip Code	;			
	ANDRES@MULSERV.NET					
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	on concerning this matter, pleas	e call:				
ANDRES AVILA		at (_) 277-2308			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check f	or the following amount made j	payable to the Florida Depa	irtment of State:			
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810			

Articles of Amendment to Articles of Incorporation of

LVG CONSTRUCTION CORP

(Name o	of Corporation as curre	ntly filed with the Florida Dept. of State)	
P19000081707			
•	(Document Number	of Corporation (if known)	-
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the fol	llowing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	Corp, " "Inc, " or "Co".	"company," or "incorporated" or the abbr A professional corporation name must of I."	eviation "Corp.," contain the word
B. Enter new principal office address,	if applicable:	N/A	
(Principal office address MUST BE A S			+ 3 + 3
			<u></u>
			<u> </u>
C. Enter new mailing address, if appl	icable:	N/A	1
(Mailing address MAY BE A POST		1974	
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			<u>ي.</u> 20
			
		idress in Florida, enter the name of the	
new registered agent and/or the new		<u>288:</u>	
Name of New Registered Agent	N/A		
	(Florida	street address)	
Van Bankaan 1000 as Albanan	N/A	. Florida	
New Registered Office Address:		(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Age	ent:	
I hereby accept the appointment as regis	tered agent. I am familia	r with and accept the obligations of the pos	ution.
	Signature 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	JOSE G DOBLADO	3803 NW 23TH AVE
Add	_	_	MIAMI FLORIDA 33142
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			<u></u>
Remove			

Ą	litional sheets, if	necessary).	(De specijie)				
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If an amer	idment provide	es for an excl	hange, reclass	ification, or ca	ncellation of iss	ued shares,	
provision	s for implemen	ting the ame	endment if not	contained in t	he amendment	itse <u>lf:</u>	
(if no	t applicable, ind	licate N/A)					
4							
-			<u> </u>			-	
					- ·		
							· · · · · · · · · · · · · · · · · · ·

	th amendment(s) adoption: 11 - 25 - 2020	*C - Ale Ale Ale
The date of each	1 4110114114(3) 444 54441	, if other than the
date this docume		
Effective date <u>if</u>	familicable: 11 - 25 - 2020	
Enternite dans g	(no more than 90 days after amendment file date)	
	te inserted in this block does not meet the applicable statutory filing requirements, this date ective date on the Department of State's records.	will not be listed as the
Adoption of An	mendment(s) (CHECK ONE)	
The amendme action was no	nent(s) was/were adopted by the incorporators, or board of directors without shareholder action of required.	and shareholder
	nent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) holders was/were sufficient for approval.	
☐ The amendmenust he sepa	nent(s) was/were approved by the shareholders through voting groups. The following statement arately provided for each voting group entitled to vote separately on the amendment(s):	ı
"The nu	umber of votes cast for the amendment(s) was/were sufficient for approval	
by	, "	
· /	(voting group)	
	Signature Medical Jeans (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)	
	Milton Jorezano (Typed or printed name of person signing)	
	(Typed or printed name of person signing) Presiden	
	(Title of person signing)	