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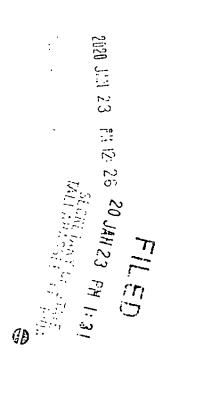
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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JAN 23 2017

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: THE ISRAEL CONSTRUCTION BUILDER'S GROUP, INC. P2000000 3263 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ARRECU P. RICHARDSON
Name of Contact Person THE ISRAEL CONSTRUCTION BUILDER'S GRUPP, INC. F-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: VARLELL KICHARISON
Name of Confact Person at (<u>954</u>) <u>279 - 0490</u> 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 Certified Copy Certificate of Status Certificate of Status

(Additional copy is

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certified Copy

(Additional Copy is enclosed)

Articles of Amendment

Articles of Incorporation

THE I SMALL CONSTRUC	TION BUILDER'S GIZOUP, INC.	
(Name of C	orporation as currently filed with the Florida Dept. of State)	
(<u>Name of C</u> P2000000 3263		
7,0000000	(Document Number of Corporation (if known)	<u>.</u>
D		amandmant(g) t
its Articles of Incorporation:	6, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following a	imenomeni(s) (
A. If amending name, enter the new name	of the corporation:	
	7	The new
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Corp" chartered," "professional association," or	word "corporation," "company," or "incorporated" or the abbreviation ρ ," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."	"Corp.," the word
B. Enter new principal office address, if a (Principal office address MUST BE A STRE		
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF)		
D. If amending the registered agent and/o	or registered office address in Florida, enter the name of the	
new registered agent and/or the new re		= 77
Name of New Registered Agent	65 Pr 17 Hz	23
 -	(Florida street address)	圣門
Van Danis and Adding Change	(Piorida street adaress)	 ప్ర
New Registered Office Address:	(City)	ode)
New Registered Agent's Signature, if chan I hereby accept the appointment as registere	nging Registered Agent: d agent. I am familiar with and accept the obligations of the position.	
	Signature of New Registered Agent, if changing	
Check if applicable [2] The amendment(s) is/are being filed pursue.	uant to s. 607.0120 (11) (c), 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)

Example:

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 Doc 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	<u>V</u> <u>Mike Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	PRESIDENT APRYL J. RICHARDSON	3411 HW 202 ST
_ X Add	, .	MIAMI GARJENS, FL
Remove	2	33056
2) Change	COO SAM BRUCE	1920 NW47TH
Add		LAUDERHILL, FL 33313
Remove 3) Change	SECRETARY MIKE BLACK	
Add	,	4701 NW 20 TST
_ <u>/</u> Remove	\mathcal{L}	LAUDERHILL, FL 33313
4) Change	UP DALE CARTER	2 2 50/
Add		P.O Box 50612
<u></u> ★ Remove		LAUGERHILL FL 33313
5) Change		25.00
Add		
Remove		23 /
6) Change		- B 17
Add		(A)
Remove		<i>¶p :-</i>

f amending or adding additional Articles, enter change(s) here: Mtach additional sheets, if necessary). (Be specific)		
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	23 355 255 255 255 255 255 255 255 255 2	r
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	*1,_ `	,
provisions for implementing the amendment if not contained in the amendment itself:	7 PH	i
(if not applicable, indicate N A)	98 =	C
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	-10 1>	_
		_
		_

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: JANUARY 21, 2020 (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 will document's effective date on the Department of State's records.	
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
Z. The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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):	20
"The number of votes east for the amendment(s) was/were sufficient for approval	FIL 23
by	·
Dated /-21-2020	
Signature Dear Desident or other officer - if directors or officers have not been	≌ —
(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)	
DARRELL RICHARDSON (Typed or printed pame of person signing)	
(Typed or printed name of person signing) (HIEF FINANCIAL OFFICER	

(Title of person signing)

. . . .