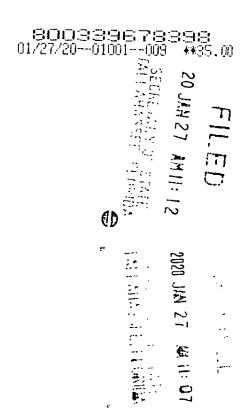
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COVER LETTER

Division of Corporations
NAME OF CORPORATION: THE ISPAEL CONSTRUCTION BUILDER'S GROUP, INC. DOCUMENT NUMBER: P200000 3263
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person 1 HE TSPACE CONSTRUCTION BULLDER'S GROUP, THE Firm/ Company 1920 N W 47 ^{7H} AUE Address LAUDERHILL, T-6 33313 City/ State and Zip Code 1 AMCD DARRELL QUAHOO, Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DARRELL RICHARD SON at (954) 279-0490 Name of Contact Person Area Code & Daytime Telephone Number
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 Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

Articles of Amendment to Articles of Incorporation of

C	TION BUILDER'S GROUD INC.
	1 as currently filed with the Florida Dept. of State)
P2000000 3263	ras currently fried with the Florida Dept. of State)
(Docume	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
	The new
name must be distinguishable and contain the word "cor," Inc.," or Co.," or the designation "Corp," "Inc.," "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word lation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	20 1.55 1.17
D. If amending the registered agent and/or registere	
new registered agent and/or the new registered of	ffice address:
Name of New Registered Agent	
	4N - 2
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis	tered Agent
	am familiar with and accept the obligations of the position.
Signati	ure 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)

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 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	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1)Change	Pres DARREU P. RICHARDSON	1920 NW 47TH AUC
bbA <u>X</u>		LAUDERAILU, FL 333/3
Remove	PRES ADRYL J. RICHARDSON	
2) Change	PRES ADRYL J. RICHARDSON	(3 - ž ·
Add	COD SAM BRUCE	MIAMI GARDENS EL MI
Add		1920 Ny 7776
X Remove		LAUDERHILL, FL 33313
4) Change	SECRETARY MIKE BLACK	-
Add	•	4701 NW 20TH ST
<u></u> Remove	VP DALE CARTER	LAUDERHILL, FL 33313
5) Change	VI DACE CARRIER	P.O. Box 50612
X Remove		LAUDERHILL, FL 33313
6) Change		
Add		
Remove		

famending or adding additional Articles, enter change(s) here: Mach additional sheets, if necessary). (Be specific)			
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	12	•	
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,		F	•
provisions for implementing the amendment if not contained in the amendment itself:	19 -21 19 -21	27	Ĭ
(if not applicable, indicate N A)	<u> </u>		7
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The date of each amendment(s) adoption:date this document was signed.	·	, if other than the
Effective date if applicable: JANUARY 2/ 2020 Ino 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 document's effective date on the Department of State's records.	date will no	ot be fisted as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)		
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder a action was not required.	ection and sh	areholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendme by the shareholders was/were sufficient for approval.	ent(s)	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes east for the amendment(s) was/were sufficient for approval by"	(F L.
(voting group) Dated		
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)		
Typed or printed name of person signing) CHIEF FINANCIAL OFFICER (Title of person signing)		

. . . .