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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ALL FLORIDA C	ONSTRUCTION AND MA	ANAGEMENT CORP
	BER: P20000019685		
The enclosed Articles	s of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	itter to the following:	
	KIM M DIXON		
		Name of Contact Person	n
		Firm/ Company	
	3217 SPICER AVE		
		Address	
	GRAND ISLAND FL 32735		
		City/ State and Zip Cod	e
	ALLFLCONSTRUCTIONIN	IC@GMAIL.COM sed for future annual report	
	E-mail address: (to be in	sed for future annual report	notitication)
For further information	on concerning this matter, plea	se call:	
KIM M DIXON		at ( 352	_) 409-7172
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check fi	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	iling Address pendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## **Articles of Amendment**

to

## Articles of Incorporation

of

ALL FLORIDA CONSTRUCTION AND MANAGEMENT CORP

(Name	of Corporation as currently	filed with the Florida Dept. of State)	
P20000019685			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <i>Fl</i>	lorida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "( "chartered," "professional association,"	Corp." "Inc," or "Co". A		
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )		102
			· · ·
			1.
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BUX</u> /		12. 12.
			<del></del>
D. If amending the registered agent at new registered agent and/or the ne		ss in Florida, enter the name of the	
	PATRICK S SCHEIDLER		
Name of New Registered Agent			
	13815 ADAMS STREET (Florida stree	of melalar const	
	GRAND ISLAND	32	2735
New Registered Office Address:	- <u>-</u> -	, Florida, Florida	(Zip Code)
			, , , , , , , , , , , , , , , , , , ,
New Registered Agent's Signature, if of the land		th and accent the obligations of the nov	sition
as as	cicle School	e.	
	Signature of New Reg	gistered 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	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	0	SEAN A PICKARD	13745 ADAMS STREET
Add			GRAND ISLAND FL 32735
X Remove			
2) Change	0	NICOLE L PICKARD	13745 ADAMS STREET
Add			GRAND ISLAND FL 32735
X Remove 3) Change	<u>o</u>	LANDON L SMITH	3217 SPICER AVE
Add			GRAND ISLAND FL 32735
X Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			<del></del>
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
All districts and a second sec	

	APRIL 1, 2020	The section of the section of
The date of each amendment(s) a date this document was signed.	uopuon:	, if other than the
Effective date if applicable:		<del></del>
•	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad- action was not required.	opted by the incorporators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amount of ficient for approval.	endment(s)
	proved by the shareholders through voting groups. The followin each voting group entitled to vote separately on the amendmen	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
MAY 11, 2	020	
Signature (.		
(By a d selecte	irector, president or other officer - if directors or officers have r d, by an incorporator - if in the hands of a receiver, trustee, or o ted fiduciary by that fiduciary)	
	KIM M DIXON	
•	(Typed or printed name of person signing)	<u> </u>
	PRES	
	(Title of person signing)	