Division of Corporations Electronic Filing Cover Sheet

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Ĭ0:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : THORPE'S CONSULTING SYSTEMS, INC.

Account Number : I20050000009

Phone

: (407)352-8514

Fax Number

: (407)540-9620

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: __ TONYEACAA@GMAIL.COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN ASCEND CONSTRUCTION GROUP, INC.

MSCEND CONSTRUCT.	,	Y SULKER
Certificate of Status	0	FEB 1 5 2022
Certified Copy	0	
Page Count	01	

Electronic Filing Menu Corporate Filing Menu Help

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1-407-540-9620

From: Lysander Thorpe EA CAA

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Articles of Amendment to Articles of Incorporation of

(Name o	f Corporation as current	ly filed with the Florida Dept.	of State)		
P20000023983					
	(Document Number of	of Corporation (if known)			
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation ado	pts the following	3 amendment(s)	
A. If amending name, enter the new na	me of the corporation:				
ASCEND CONSTRUCTION & RESTO	RATION, INC.			The new	
name must be distinguishable and contain	the word "corporation,"	"company," or "incorporated"	or the abbreviati	on "Corp.,	
" "Inc.," or Co.," or the designation word "chartered," "professional associate		"P.A."	name must co	ntain the	
B. Enter new principal office address, if applicable:		2323 EL MARRA DRIVE	2323 EL MARRA DRIVE		
(Principal office address MUST BE A.S.)	TREET ADDRESS)	OCOEE, FL 34761			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2323 EL MARRA DRIVE		2022 5	
		OCOEE, FL 34761	/2	(J)	
			Ω ~< () < ()		
			rn _{co}		
D. If amending the registered agent an new registered agent and/or the new	d/or registered office add	fress in Florida, enter the nam	e of the		
new registered agent and/or the nev	THORPES CONSULTIN		, <u>m</u>	-	
<u>Name of New Registered Agent</u>				-	
	7345 W SAND LAKE RD STE 306 (Florida street address)				
	• ,• , ,		32819		
New Registered Office Address:	ORLANDO		Florida	Code	
		(Cuy)	164)	. 6647	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen vered agent. I am familiar	t: with and accept the obligations	of the position.		
		er thorpe			

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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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 = Dtrector; 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	<u>PT</u> <u>John</u>	Doc	
X Remove	<u>V</u> <u>Mike</u>	: Iones	
X Add	<u>SV</u> <u>Sally</u>	· Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	Director	ZDEB, ADAM	2323 EL MARRA DRIVE
X Add			OCOEE, FL 34761
Remove			2222 EL MADDA DDIVE
2) Change	Director	AKROUT, SAW	2323 EL MARRA DRIVE
X Add			OCOEE, FL 34761
Remove 3) Change	Director	VELASCO, ROBERT	2323 EL MARRA DRIVE
X Add			OCOEE, FL 34761
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

To: +18506176383 *

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From: Lysander Thorpe EA CAA

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. <u>If ameno</u> (Attach <i>a</i>	ding or adding additions additional sheets, if necess	at Articles, enter chi sary). (Be specific)	unge(s) here:			
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provisi	nendment provides for a ions for implementing th Tnot applicable, indicate i	<u>re amendment if no</u>	ification, or ca t contained in	ncellation of iss	ued shares. itself:	
				<u> </u>		
				<u></u>		
		<u> </u>				***

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From: Lysender Thorpe EA CAA

H220000561563

	02-11-2022	15 1
The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
	1-2022	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date,	
Note: If the date inserted in this b document's effective date on the Do	lock does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amifficient for approval.	iendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	ny statement at(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
bν	···	
<u> </u>	(voting group)	
02-11-202		
Dated		
0.		
selecte	irector, president or other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, or ted fiduciary by that fiduciary)	not been other court
	SAW AKROUT	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	