## P20000068227

(Re	questor's Name)	
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## **COVER LETTER**

TO: Amendment Section - Division of Corporations	•
NAME OF CORPORATION: IMPERO CO	ONSTRUCTION INC
The enclosed Articles of Amendment and fee	
Please return all correspondence concerning to	his matter to the following:
ANIBAL D CABRER	Α
-	Name of Contact Person
THREE BRIDGES AD	DVISORY
	Firm/ Company
817 E CONONVER S'	
	Address
TAMPA, FL 33625	
	City/ State and Zip Code
THREEBRIDGESAD	VISORY@GMAIL.COM
	o be used for future annual report notification)
For further information concerning this matter	r, please call:
ANIBAL D CABRERA	at (813 ) 409-8465
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:
S35 Filing Fee	=
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahasson, Et 32303

## Articles of Amendment to Articles of Incorporation of

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IMPERO CONSTRUCTION INC			
	of Corporation as curre	ntly filed with the Florida Dept. of State)	. —
P20000068227			
	(Document Number	r 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 follo	owing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
ΔlN			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "Chartered," "professional association,"	$Corp_*$ " "Inc," or " $Co$ ".	"company," or "incorporated" or the abbrev A professional corporation name must co 1."	iation "Corp.," ntain the word
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		۵۱۸	<del></del>
C. Enter new mailing address, if appl	icable:		
(Mailing address <u>MAY BE A POST</u>		N/4	<del>-</del> )
			<u>.</u>
			<u> </u>
D. If amending the registered agent an new registered agent and/or the new		Idress in Florida, enter the name of the	2: 97
Name of New Registered Agent	4\\\		
	4P7 I	strevi addressi	
		street autress)	
New Registered Office Address:	N/A	Cuvi Florida, Florida	Zip Coder
		, , , , , , , , , , , , , , , , , , ,	raji Cotter
New Registered Agent's Signature, if c	hanging Registered Age	nt:	
I hereby accept the appointment as regist	tered agent. I am familia	r with and accept the obligations of the positi	OH.
_N/∆	·	Registered Agent, if changing	
• -,	Signature of New	Registered Agent, if changing	-
Check if annioable			

 $\square$  The amendment(s) is are being tiled 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,

X Change	<u>PT</u>	John Doe	
X Remove	$\overline{\Lambda}$	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	M	GORDON CARTER	1605 N 23RD ST
X Add			TAMPA, FL 33605
Remove			
2) Change			
Add			
Remove 3 ) Change		<del>-</del>	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	Cies, enter change(s) nere.  (Be specific)
V/A	
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
<u> </u>	
<del></del>	

The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	date will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder a action was not required.	action and shareholder
☐ 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.	:nt(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):	ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
tvoting group)	
Dated 11-27-200  Signature (By a director, president or other officer – if directors or officers have not bee	
selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	ourt
Toseph Procepio (Typed or printed name of person signing)	
(Title of person signing)	

the

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