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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: AMN BUILDERS	INC	<u></u>
	MBER: P20000069821		
The enclosed Articl	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	MARLON ARTICA		
		Name of Contact Person	
	AMN BUILDERS INC		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	6137 JIBWAY CT		
		Address	
	ORLANDO FL 32807		
		City/ State and Zip Code	
	AMNBUILDERS@OUTLO	OK.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informated MARLON ARTICA	ion concerning this matter, pleas		424-7280
Nam	e of Contact Person	Area Coc	de & Daytime Telephone Number
Enclosed is a check	for the following amount made		
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)
$\frac{1}{A}$	lailing Address mendment Section ivision of Corporations O. Box 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

Articles of Amendment to Articles of Incorporation of

$\Delta \Delta \Delta \Delta \Delta$	121	H D	EDC	IMC

(Name of Corporation as current	ly filed with the Florida Dept. of State)
20000069821	Ć
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1136 ALICANTE AVE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	ORLANDO FL 32807
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1136 ALICANTE AVE
	ORLANDO FL 32807
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres.	
Name of New Registered Agent	
(Florida s	reet address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
Signature of New I	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)

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>	<u>John Doe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	MARLON ARTICA	6137 JIBWAY CZT
Add			ORLANDO FL 32807
Remove			
2) Change	P	MARLON ARTICA	1136 ALICANTE AVE
X Ađd			ORLANDO FL 32807
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sh	ling additional Arti wets, if necessary).	(Be specific)	·····			
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If an amendment p	rovides for an exch	ange, reclassifica	tion, or cancella	tion of issued s	hares,	
provisions for imp	olementing the ame ble, indicate N/A)	<u>ndment if not co</u>	ntained in the ar	ne <u>ndment itsell</u>	<u>:</u>	
A time approximation						
						
					 _	
<u>,</u>						
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The date of each amendment(s) ac	' 09/15/2020 doption:	, if other than the
date this document was signed.		 .
	5/2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	block does not meet the applicable statutory filing requirements, this department of State's records.	late 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 shareholder act	tion and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment afficient for approval.	t(s)
☐ The amendment(s) was/were app		
must be separately provided for "The number of votes east	each voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval	
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must be separately provided for "The number of votes east		
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