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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: L & H CONTRAC	CTORS INC			
DOCUMENT NUMB					
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	oondence concerning this ma	tter to the following:			
	LUZ DARY OROZCO				
-		Name of Contact Person	1		
-	Firm/ Company				
	658 STANTON DR	, ,			
-	Western G. 2225	Address			
-	WESTIN, GA 33327	City/ State and Zip Code	<u> </u>		
	TINADEZA@LIVE.COM	ony, state and 15.17 cod.	•		
-	_	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
LUZ DARY OROCO		at (<u>678</u>	634-0088		
Name o	f Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren	tly filed with the Florida Dept. of State) 4
P20000084041	273 HH 21 AM 10: 00
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	TV.
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.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	658 STANTON DR
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	WESTIN, FL 33327
	. 23
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	658 STANTON DR
	WESTIN, FL 33327
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent	
658 STANTON DR	
(Florida s	street address)
New Registered Office Address: WESTIN	, Florida 33327
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	

Check if applicable

L & H CONTRACTORS INC

☐ 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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	PVTS	LUZ DARY OROZCO	658 STANTON DR
X Add			WESTIN, FL 33327
Remove			
2) Change	PTS	SANTIAGO, EDUARO MARTINEZ	4104 PINE RIDGE LA
Add			WESTON, FL 33331
X Remove Change			
Add			.
Remove			
4) Change			
Add			-
Remove			
5) Change	 .		
Add			
Remove			
6) Change			
Add			_
Remove			

(Atta	nending or adding addit th additional sheets, if ne	cessary). (Be sp	recific)			
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_						
						
fan	amendment provides for	or an exchange, r	eclassification.	or cancellation	of issued shares.	
рго	visions for implementin (if not applicable, indica	g the amendment	if not contain	ed in the amend	nent itself:	
	(у пос аррисиоле, такса	ie ivaj				
	-					 .

, ,	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file a	
	(no more than 90 days after amendment file a	date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing require Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sh	areholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the sufficient for approval.	e amendment(s)
	pproved by the shareholders through voting groups. The folior each voting group entitled to vote separately on the amend	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
7/31/20 Dated		
Signature (By a	director, president or other officer - if directors or officers h	rave not been
selec	ted, by an incorporator – if in the hands of a receiver, trustee inted fiduciary by that fiduciary)	, or other court
	LUZ DARY OROZCO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

. . . .