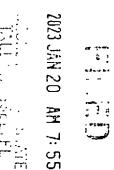
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(Re	equestor's Name)	
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ap 3/22/2003

COVER LETTER

TO: Amendment Section Division of Corporations DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person E-mail address: (to be used for future annual report notification For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

Finip

<u> </u>	1tims	INC	2023 JAN 20	_AH_7:55
(Name of Corporation as current	tly filed with the Flog	rida Dept. of State)) 	JUNE TANK
(Document Number	f O of Corporation (if kno	own)	1/1/	renearly
Pursuant to the provisions of section 607.1006, Florida Statutes, this articles of Incorporation:	•		ollowing amendr	nent(s) to
A. If amending name, enter the new name of the corporation: SIVA CONSTRUCTION mame 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 corpo	porated" or the abb	reviation "Corp.	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)				· -
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		er the name of the		
Name of New Registered Agent				
(Florida s	troet address)			
New Registered Office Address:	(Cuy)	Florida	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the o	obligations of the po	sition.	

Signature of New 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)

Example:

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 De	<u>ne</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>SV</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				`
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		<u> </u>
Add				
Remove				<u> </u>
6) Change		_		
Add				
Remove				

ttach <i>additional</i>	sheets, if necessary). ((Be specific)			
•					
	 "				
					
,, <u>.</u>					
					
<u> </u>					
					
an amendment	provides for an exchan	nge, reclassification	a. or cancellation o	of issued shares.	
rovisions for in	provides for an exchaniplementing the amendable, indicate N/A)	ment if not contain	red in the amendn	ient itself:	
(if not applic	able, indicate N/A)				
		<u> </u>			
					,

The date of each amendment(s) adoption: , if other than the 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 date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

(Title of person signing)