## P21000056931

(Re	equestor's Name)	·
(Address)		
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
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(Do	curnent Number)	
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SECRETARY OF STA

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## COVER LETTÉR

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: RAY GRADING C	OF SWFL INC			
	1BER: P2[00005693]				
The enclosed Article	es of Amendment and fee are su	bmitted for filmg.			
Please return all cor	respondence concerning this ma	itter to the following:			
	LOPEZ ADELA, YANIET				
	Name of Contact Person				
	RAY GRADING OF SWFL	INC			
		Ficin/ Company			
	4459 31ST PL SW				
		Address			
	NAPLES, FL 34116				
		City/ State and Ztp Cod	e		
	YANIET8402@GMAIL.CO	M			
	E-mail address: (to be us	sed for future annual report	notification)		
	ion concerning this matter, plea		212.0765		
LÓPEZ ADELA, Y		at ( 230	_) 213-8765		
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Dep	artinent of State:		
№ \$35 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			Address		
		Amendment Section Division of Corporations			
	O. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			
T:	llahassee, FL 32314				

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

## FILED

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RAY GRADING OF SWELING	SECRETARY OF STR
(Name of Corporation a	is currently filed with the Florida Dept. of State ALLAHASSEF, F
P21000056931	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Stats Articles of Incorporation:	itutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpo	oration;
name must be distinguishable and contain the word "corpo.	The = new oration," "company," or "incorporated" or the abbreviation "Coro.,"
Inc., or Co., or the designation "Corp, "Inc, or "chartered," "professional association," or the abbreviati	"Co". A professional corporation name must contain the word ion "P.A."
B. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRE</u>	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
<ol> <li>If amending the registered agent and/or registered enew registered agent and/or the new registered office.</li> </ol>	
	<u> </u>
Name of New Registered Agent	***************************************
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
Sew Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	red Agent: n familiar with and accept the obligations of the position
The second secon	
Signature	e of New Registered Agent, if changing
Theck if applicable	
1 1	

☐ The amendment(s) is/are being filed pursuant to 8, 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.

Example: <u>X</u> Change	<u>PT</u>	John De	nc	
X Remove	<u>V</u>	Mike Je	ones -	
X Add	<u>sv</u>	Sally Si	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP		Raidei Veliz	4459 31ST PL SW
X Add		<del></del>		NAPLES, FL 34116
Remove				
2) Change		_		
Add				
Remove 3.) Range	<del></del>			
Add				
Remove				
4) Change	_	_		
Add				
Remove				
5) Change		<del></del>		
Add				
Remove				
6) Change		_		
Add				
Remove				

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<u>change, reclassifi</u>	cation, or cancell	ation of issued sha	ires,
nendment if not c	ontained in the ar	mendment itself:	
	change, reclassifinendment if not c	change, reclassification, or cancellatendment if not contained in the an	change, reclassification, or cancellation of issued sha acadment if not contained in the amendment itself:

The date of each amendment(s) as	doption:, if other than if
date this document was signed.	
Effective date if applicable:	(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	dock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were adduction was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add by the snarcholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) officient for approval.
☐ The amendment(s) was/were approximate the separately provided for	oroged by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendments:
"The number of votes east	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
02/16/2022	
Dated	
Signature * 7	DINE
(By acti	iffelor spesident 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
	ed fiduciary by that fiduciary)
	ŁOPEZ ADELA, YANIET
	(Typed or printed name of person signing)
	President
	(Title of person signing)