## P21000064816

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## COVER LETTER

TO: Amendment Section Division of Corporations

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

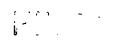
NAME OF CORP	ORATION: HIERRO CONSTI	RUCTION, INC			
DOCUMENT NU	MBER: P21000064816	<del>-</del>			
	les of Amendment and fee are su	bmitted for filing.			
Please return all cor	rrespondence concerning this ma	tter to the following:			
	YUNEYSIS COLAS SUARI	ΞZ			
	<del> </del>	Name of Contact Person	1		
	HIERRO CONSTRUCTION	. INC			
		Firm/ Company			
	275 GROUND DOVE CIR				
	Address				
	LEHIGH ACRES FL 33936				
		City/ State and Zip Code	e		
	E-mail address: (to be us	sed for future annual report	notification)		
For further informa	tion concerning this matter, pleas	se call:			
YUNEYSIS COLA	S SUAREZ	at (	600-9672		
Name of Contact Person Area Code & Duytime Telephone Number					
Enclosed is a check	for the following amount made	payable to the Florida Depa	ortment of State:		
\$35 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)		

Street Address

Amendment Section

Division of Corporations
The Centre of Tallahassee

## Articles of Amendment to Articles of Incorporation of



HIERRO CONSTRUCTION, INC		2021 AUS -2 AM 7: 04
(Name of Corpora	tion as currently filed with the	: Florida Dent. of State)
P21000064816		SECTION OF STATE
(Does	ument Number of Corporation (i	f known)
Pursuant to the provisions of section 607.1006. Flori its Articles of Incorporation:	da Statutes, this <i>Florida Profit</i> (	Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the word " "Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abb	:." or "Co". A professional	The _ new incorporated" or the abbreviation "Corp.," corporation name must contain the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	(OX)	
D. If amending the registered agent and/or regist new registered agent and/or the new registered	ered office address in Florida, d office address:	enter the name of the
Name of New Registered Agent	-	
	(Florida street address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	AMAURY HIERRO FERNANDEZ	275 GROUND DOVE CIR
X Add			LEHIGH ACRES FL 33936
Remove			
2) Change			
Add			
Remove 3 ) Change	~		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u>-                                      </u>
Remove			
6) Change		<del></del>	
Add			-
Remove			

attach additional:	ding additional Ar sheets, if necessary).	. (Be specific)				
	1					
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f an amendment	provides for an ex-	change, reclassi	ification, or ca	ncellation of is	sued shares,	
	iplementing the an	<u>iendment if not</u>	contained in	the amen <u>dmen</u>	t itself:	
(ң пөі аррис	able, indicate N/A)					
			<del> </del>		<del></del> <del></del>	

	loption:	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :		
	tno more than 90 days after amendme	nt file dater
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing r partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ade action was not required.	pted by the incorporators, or board of directors with	yout shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast fileient for approval.	for the amendment(s)
	roved by the shareholders through voting groups. It each voting group entitled to vote separately on the	
	for the amendment(s) was/were sufficient for appro	val
by	(voting group)	<del></del>
	(voting group)	
07/27/2021 Dated	MOS	
(By a di selected	rector, president or other officer – if directors or off I, by an incorporator – if in the hands of a receiver, ed fiduciary by that fiduciary)	ficers have not been trustee, or other court
	YUNEYSIS COLAS SUAREZ	
	(Typed or printed name of person signing	ıg)
	PRESIDENT	

(Title of person signing)