P21000074888

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Longitude Construction Inc.
DOCUMENT NUMBER: P21000074888
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 Longitude Construction Firm/ Company 2994 Holmes Valley Rd. Address Vernon, FL 32462 City/ State and Zip Code Steven @ Longitude Construction. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Steven Knew at (850) 400 - 1170
Name of Contact Person Area Code & Daytime Telephone Number
Sassifiling Fee Status Certificate of Status (Additional copy is enclosed) \$35 Filing Fee Certificate of Status Sassifiling Fee & Certificate of Status (Additional Copy is enclosed) Certificate of Status
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LONGITUDE CONSTRUCTON INC (Name of Corporation as currently filed with the Florida Dept. of	State)
· · · · · · · · · · · · · · · · · · ·	<u>state</u>)
P21 600 74 888 (Document Number of Corporation (if known)	· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts ts Articles of Incorporation:	the following amendment(s)
. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or th "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name "chartered," "professional association," or the abbreviation "P.A."	ne abbreviation "Corp.," must contain the word
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	· · · · · · · · · · · · · · · · · · ·
	• • • • • • • • • • • • • • • • • • • •
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Mailing dauress MAT BE A POST OFFICE BOX)	<u> </u>
	· ·- ··
). If amending the registered agent and/or registered office address in Florida, enter the name o	<u>f the</u>
new registered agent and/or the new registered office address:	· ·
Name of New Registered Agent	
	<u> </u>
(Florida street address)	1
	rida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of t	the position.
Signature of New Registered Agent, if changing	
Theck 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 Do	<u>oc</u>				
X Remove	$\underline{\mathbf{V}}$	Mike Jo	nes				
X Add	<u>sv</u>	Sally Sr	<u>nith</u>				
Type of Action (Check One)	<u>Title</u>		Name		<u>Address</u>		
1) Change	CEC	2	STEVEN	KUENY	10% Cl Santa Rosa	nristian!	$\bar{\mathcal{D}}\iota$.
_★ ∧dd					Santa Rosa	Beach, FL	32459
Remove							-
2) Change		_					-
Add							_
Remove Change		_					-
Add							· -
Remove							•
4) Change		_					=
Add						·	-
Remove					<u></u>		• •.
5) Change		_					- -
Add						· 	_
Remove					 		
6) Change		_					_
Add							_
Remove							

(Attach additional sheets, if necessary)	ticles, enter change(s) here: (Be specific)		
	• • •		
			
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	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
			-
If an amendment provides for an ex-	change, reclassification, or can	rellation of issued shares.	
provisions for implementing the am	endment if not contained in th	e amendment itself:	-
(if not applicable, indicate N/A)			
			,
	· · · · · · · · · · · · · · · · · · ·		
			<u> </u>
	·		
· · · · · · · · · · · · · · · · · · ·			

The date of each amendment(s) adop	otion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depa	ek does not meet the applicable statutory filing requirement rtment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte action was not required.	ed by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the am cient for approval.	endment(s)
	ved by the shareholders through voting groups. The following ch voting group entitled to vote separately on the amendment	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
selected, t	ctor, president or other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, or offiduciary by that fiduciary)	
	(Typed or printed name of person signing)	<u></u> .
	Prestident	- - 5
	(Title of person signing)	