## P21000078849

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: M & BROTHERS	CONSTRUTIONS CORP				
	BER:					
	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	JOSE LEON					
	Name of Contact Person					
	LBS LEON BUSINESS SERVICES LLC					
	Firm/ Company					
	8333 W MCNAB RD STE 114					
	Address					
	TAMARAC, FL 33321					
	,	City/ State and Zip Code				
	info@leonbusineservices.con	ו				
	E-mail address: (to be us	ed for future annual report	notification)			
	n concerning this matter, pleas					
JOSE LEON		at (	_) 323-9074			
Name of Contact Person		Area Coo	de & Daytime Telephone Number			
Enclosed is a check fe	r the following amount made p	payable to the Florida Depa	irtment of State:			
■ \$35 Filling Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Ft. 32303				

SECRETARY OF STAT

## **Articles of Amendment** to Articles of Incorporation οf

M & BROTHERS CONSTRUTIONS CORP

(Name of Corporation as currently file	d with the Florida Dent, of State)
P21000078\$49	divide the Florida Dept. of State)
(Document Number of Cor	poration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:	da Profit 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 "corporation," "comportion," or "lnc," or "Co". A programmer or "P.A." or the designation "Corp," "Inc," or "Co". A programmer or "professional association," or the abbreviation "P.A."	The new my." or "incorporated" or the abbreviation "Corp.," fessional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	TACCI
<del></del>	HA)
<del>-</del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	A A
	S 0
	<u> </u>
2. If amending the registered agent and/or registered office address in	Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street ado	íress)
New Registered Office Address: (City)	, Florida
(Cui)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with a	nd accept the obligations of the position.
Signature of New Register	red 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)

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:

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>	Address	
1) Change	VP	JACKIE G GONZALEZ	4711 NE 1 TER	2020 SEC
X Add			DEERFIELD BEACH	SECRET
Remove			33064	F 33
2) Change				99 B
Add				1.S.P.
Remove 3 ) Change				- FEE - 6
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

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 vidocument's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required.	and shareholder
☐ 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  by	2023 MAY -9 AM SECRETARY OF TALLAHASSEE
Dated $\frac{5/3/2073}{\text{Signature}}$	AMID: 16 CF STATE SEE, FL
(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)	
Typed or printed name of person signing)	
(Title of person signing)	