	(Requestor's Name)
	(Address)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	LICONE
	J. HORNE
	UCT - 6 2022
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2822 OCT -- 6 PH 4: 43

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Green Brothers. TUC
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
Name of Contact Person
Green Brothers Constauction & There inc
Hunter a. Green 9999@ ic bud. (on
Address
Crawford ville Florida 32327 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Hunter Gray at (32821) STG-363-7484 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations Street Address Amendment Section Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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 FII ED

2022 OCT -6 PM 4: 50

	1)	Document Number of	Corporation (if know	vn)	
Pursuant to the provisions of secits Articles of Incorporation: A. If amending name, enter the			Florida Profit Corpoi	ration adopts the foll	owing amendment(s) to
A. It amending name, enter th	ie new traine of	the corporation.			
name must be distinguishable an "Inc.," or Co.," or the design "chartered," "professional asso	nation "Corp," ociation," or the	"Inc." or "Co". A abbreviation "P.A"	ompany," or "incorp professional corpor	orated" or the abbre ration name must c	The new viation "Corp.," ontain the word
B. Enter new principal office (Principal office address <u>MUS</u>)					
C. Enter new mailing address (Mailing address MAY BE					
D. If amending the registered new registered agent and/o	agent and/or re or the new regis	egistered office addr tered office address	ess in Florida, enter	the name of the	
Name of New Register	ed Agent				
		(Florida str	eet address)	<u> </u>	
New Registered Office	Address:		(City)	, Florida	(Zip Code)
		ng Registered Agent			ition.

Check if applicable

 \Box 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> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Ghange Add	TG-	Boom Gray	2650 harriga way
Add			Tallahossee FL 32304
2) Change	<u>(F0</u>	Involly Matthew moody	504 Whitekerst
Add			Talkhussee FU 32305
Remove 3) Change			
Add			<u></u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Arti- ttach additional sheets, if necessary).	(Be specific)	
· · · · · · · · · · · · · · · · · · ·		
		·
		
		17-17-
f an amandmant provides for an arch	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		•

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 document's effective date on the Departmen		able statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by action was not required.	the incorporators, or b	ooard of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient		number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved b must be separately provided for each vo	y the shareholders thro ting group entitled to	ough voting groups. The following statement wote separately on the amendment(s):
"The number of votes cast for the a	imendment(s) was/we	re sufficient for approval
by		
	(voting group)	
(By a director, selected, by an		per – if directors or officers have not been the hands of a receiver, trustee, or other court
	Hunter (Typed or printed	Alton Crean name of person signing)
	Presiden	
	(Title of person sig	gning)