P22000034392

(Reque	estor's Name)	
(Addre	ss)	
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PICK-UP	WAIT	MAIL
(Busine	ess Entity Nam	ne)
(Docum	nent Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ORATION: Groundworks Con	struction Inc		_
DOCUMENT NUM	TBER: P22000034392			_
	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	Tammy Sanders			
		Name of Contact Person		
	Sanders Bookkeeping & Tax	Services Inc.		₹,
		Firm/ Company		
	20931 NE Hwy 27	, ,		•
		Address		
	Williston, FL 32696			
		City/ State and Zip Cod	e	
	mike@groundworkscont.com	1		
		sed for future annual report	notification)	_
			, , , , , , , , , , , , , , , , , , , ,	
For further informati	ion concerning this matter, pleas	se call:		
				922 3300
Mike Hanna		at () 443 -1811 -3424	
Name	e of Contact Person	Area Co	de & Daytime Telephone N	umber 3
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:	A P
			_	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	F. F. C. L. 12 2022 NOV -7 PH 4: 12 SECRETARY OF STATE
	ailing Address		Address	
	nendment Section vision of Corporations		Iment Section on of Corporations	
	D. Box 6327		entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Groundworks Construction Inc.				
	(Document Number	of Corporation (if known)		
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s) to		
If amending name, enter the new na	ame of the corporation:			
ame must be distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association,"	Torp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word		
Enter new principal office address,	if applicable:	7574 NE 147th Lane		
Principal office address <u>MUST BE A S</u>		Citra, FL 32113		
Enter new mailing address, if applie (Mailing address MAY BE A POST) If amending the registered agent an new registered agent and/or the new	OFFICE BOX) id/or registered office add	dress in Florida, enter the name of the Six:		
Name of New Registered Agent	Sanders Bookkeeping &	Tax Services Inc.		
	20931 NE Hwy 27			
	(Florida s	treet address)		
New Registered Office Address:	Williston	Florida 32696 7 N		
		(City) (Zip Code)		
ew Registered Agent's Signature, if cl hereby accept the appointment as regist	hanging Registered Agen ered agent. I am familiar	it: with and accept the obligations of the position.		

Check 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Tonya Hanna	7574 NE 147th Lane
X Add		,, , , , , , , , , , , , , , , , , , ,	Citra, FL 32113
Remove			
2) Change			
Add			
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			<u>-</u>
Add			
Remove			
б) Change			
Add			
Remove			

	<i>sheets, if necessa</i> action Inc. is addi	- "	ent Tonya Hanna.			
-	-					
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			_	<u>. </u>		
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	<u> </u>	_	- -			
le .	<u>provides for an a</u>	exchange, reclas	sification, or cane	ellation of issued	<u>shares.</u>	
If an amendment		()	or contange in the	e amendment fise	<u>11.</u>	
provisions for in	ible, indicate N/A					
provisions for in	ible, indicate N/A					
<u>provisions for in</u>	able, indicate N/A		-			
provisions for in	able, indicate N/A					
provisions for in	able, indicate N/s					
provisions for in	able, indicate N/s					
provisions for in	able, indicate N/s					
provisions for in	ible, indicate N/s					
provisions for in	ible, indicate N/s					
If an amendment provisions for in (if not applic	able, indicate N/A					
provisions for in	ible, indicate N/s					

10/21/22	
The date of each amendment(s) adoption:	if other than t
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 block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	ot be listed as
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sha action was not required.	areholder
☐ 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	
(voting group)	
10/21/2022	
Dated	
M . l ~ 11	
Signature //////	
(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)	
appointed reductary by that reductary)	
Michael E Hanna	
(Typed or printed name of person signing)	
President	
(Title of person signing)	 -