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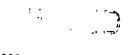
3/10/2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: H.RIVAS CONSTR	UCTION CORPORATION	<u> </u>			
DOCUMENT NUMBI	DDD0000/1007					
	f Amendment and fee are sub	mitted for filing.				
Please return all corresp	ondence concerning this man	ter to the following:				
Ŧ.	IANCER AZARAEL RIVAS	LINARES				
_	Name of Contact Person					
I	H.RIVAS CONSTRUCTION CORPORATION					
_		Firm/ Company				
1	291 SW 139TH PL					
-		Address				
:	MIAMI FL 33184					
		City/ State and Zip Code				
1	IANCERRIVAS868@GMA	IL.COM				
-	E-mail address: (to be us	ed for future annual report	notification)			
	concerning this matter, pleas					
HANCER AZARAEL	RIVAS LINARES	at (798-5695			
Name o	f Contact Person	Area Cox	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Amo Divi P.O.	ling Address Induction Section Sion of Corporations Box 6327 That are the section of the section	Amend Division The C 2415 I	Address Iment Section on of Corporations entre of Tallahassec N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment Articles of Incorporation of



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HRIVAS CONSTRUCTION CORPORATION (Name of Corporation as currently filed with the Florida Dept. of State) P22000061997 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 1291 SW 139TH PL.MIAMI.FL 33184 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: 1291 SW 139TH PL.MIAMI.FL 33184 (Mailing address MAY BE A POST OFFICE BOX) D. 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: HANCER AZARAEL RIVAS LINARES Name of New Registered Agent 1291 SW 139TH PL (Florida street address) , Florida FL 33184 MIAMI New Registered Office Address: (City) 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

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)	<u>Title</u>	Name	Address
1) Change		_	
Add			
Remove			
2) Change	_		
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) NAME CHANGE				
HANSER AZARAEL RIVAS LINARES (OLD)				
HANCER AZARAEL RIVAS LINARES (NEW)				
				
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:				
(if not applicable, indicate N/A)				

The date of each amendment(s date this document was signed.	adoption:	, if other than the
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment fit	le date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requi Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for sufficient for approval.	the amendment(s)
must be separately provided	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the amount	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	·
by	(voting group)	
08/10/20 Dated Signature	Haneuriva	
(By a selection	director, president or other officer – if directors or officer, etcd, by an incorporator – if in the hands of a receiver, trust pinted fiduciary by that fiduciary)	
	HANCER AZARAEL RIVAS LINARES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	