## P22000090019

(Requestor's Name)				
(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:				
J. HORNE NiAR - 9 2023				

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200399439472

14. CONTRACTOR #35.00





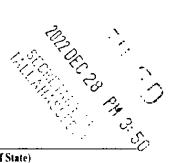
## COVERLETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	x: Comple	te precisio	on Inc		
DOCUMENT NUMBER:	···.				
The enclosed Articles of Am	endment and fee are su	bmitted for filing.			
Please return all corresponde					
	Alexis 1	Name of Contact Person  Pirm' Company			
	Complete	Firm' Company	Inc		
	1820 Clane	lo ave	·-··		
	vest palm	Address  Berch, F  City! State and Zip Code	1 33417		
For further information conc		sed for future annual report se call:	notification)		
Alexis M	lom PTC	at 1_ <b>56</b> \	1 244 6039 de & Daytime Telephone Number		
Name of Con	tact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee [	2843.75 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FI, 32303

## Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State) 22000090019 (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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: Thereby 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.

01

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)

Remove

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	Ÿ	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	P	Alexis Mompie	West partingench =1 33417
X Add			west protection and
Remove			<del></del>
2) Change			
Add			
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			<del></del>
Remove			<del></del>
6) Change			
Add			

•	icles, enter change(s) here: (Be specific)	
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an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
(1) not approvate, material		

The date of each amendment(s) adop	ion:	, if other than the
date this document was signed.		
Effective date if applicable:		
<del></del>	tno more than 90 days after amendment	file date:
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing records.	prirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	i by the incorporators, or board of directors witho	ut shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffic	i by the shareholders. The number of votes cast fient for approval.	or the amendment(s)
	ed by the shareholders through voting groups. The hyoting group entitled to vote separately on the d	
"The number of votes cast for	the amendment(s) was/were sufficient for approve	ıl
by		
,	(voting group)	
Dated 17   1 Signature	19077 How Market of the officer - if directors or officer	ers have not been
•	an incorporator - if in the hands of a receiver, tr	ustee, or other court
appointed i	iduciary by that fiduciary)  Alexis Hompile	
	(Typed or printed name of person signing	
	Darrer	
	(Title of person signing)	