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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone #	f)
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PICK-UP	☐ WAIT	MAIL
_	_	_
(Bu	isiness Entity Name	·)
(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CJD GENERAL C	ONSTRUCTION, CORP	
	BER: P22000092477		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JUAN JOSE DOLMO		
		Name of Contact Person	1
	CJD GENERAL CONSTRUCTION, CORP		
		Firm/ Company	
	255 NW 21ST ST Apt 106		
	Address		
	MIAMI, FL 33127		
		City/ State and Zip Cod	v.
	info@elisinsurance.com		
For further information	n concerning this matter, plea	se call:at (299-6757
Name of Contact Person		at (at Co) de & Daytime Telephone Number
	or the following amount made		
X \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations		Ameno	Address Iment Section on of Corporations
Division of Corporations P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303	

Articles of Amendment to Articles of Incorporation of

CID GENERAL CONSTRUCTION CORP.

(Name of Corporation a	as currently filed	with the Floric	la Dent of State)			
P22000092477	us currency mea	1010	,			
(Document	t Number of Corpo	oration (if know	n)			
Pursuant to the provisions of section 607,1006, Florida Statis Articles of Incorporation:	atutes, this <i>Florida</i>	ı Profit Corporc	ttion adopts the fo	ollowing a	amendm	ent(s) i
A. If amending name, enter the new name of the corpo	oration:					
C&JD GENERAL CONSTRUCTION, CORP				. 7	The nev	١.
name must be distinguishable and contain the word "corportine.," or Co.," or the designation "Corp," "Inc." or "chartered," "professional association," or the abbreviat	r "Co". A profe	ny," or "incorpo ssional corpore	rated" or the abb ition_name_must	reviation contain	"Corp., the word	 I
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				SECST PRINCE	2023 MAR 21 A	
D. If amending the registered agent and/or registered new registered agent and/or the new registered office		Florida, enter (he name of the	F STATE	AM 9: 07	
Name of New Registered Agent						
	(Florida street addr	rass)				
New Registered Office Address:	(City)		, Florida	Qio Car	her	
	(Cint)			711 (
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	ered Agent: in familiar with and	d accept the obl	igations of the pos	sition.		
Signature	re of New Registere	ed Agent, if char	ığing	•		

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)

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 Doe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	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. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific)	
PLEASE, ADD SYMBOL (&) BETWEEN LETTERS "C" AND "J"	
	<u>.</u>
	- · ·
	·
. 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)	
(i,, q, j,,,,,,	
	

The date of each amendment(s) adoption:late this document was signed.	, if other than the
•	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file da	(le)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shar action was not required.	cholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the : by the shareholders was/were sufficient for approval.	imendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amenda	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
03/14/2023 Dated	
Signature Juan Dolmo	····
(By a director, president or other officer - if directors or officers have selected, by an incorporator - if in the hands of a receiver, trustee, of appointed fiduciary by that fiduciary)	
JUAN J. DOLMO	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)