724000019046

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: CORE COONSTRU	UCTION CONSULTANT	S, INC.		
	BER: P24000019046				
	of Amendment and fee are sul	omitted for filing.			
Please return all corre	spondence concerning this mat	eter to the following:			
	ADRIENNE MOSS				
		Name of Contact Person	1		<u>م</u>
		Firm/ Company			
	6814 DUNCASTER STREET	r			
		Address			
	WINDERMERE, FL 34786				*.3
		City/ State and Zip Cod	c		
	amoss@corecostexperts.com			22	- ¢ 63
	E-mail address: (to be us	sed for future annual report	notification)	XX O	ယ
For further information concerning this matter, please call:			OF STATI	1 23 AM 10: 4	
ADRIENNE MOSS	<i>.</i>	at (510-5227		
Name	of Contact Person	Area Co	de & Daytime Telephone	Number	
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artinent of State:		
\$35 Filing Fee	☐\$43.75 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)		
An Di P.C	niling Address mendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Ameno Divisio The C	Address dment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite	810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as	currently filed with the Florida	a Dept. of State)
P24000019046		
(Document)	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this <i>Florida Profit Corpora</i>	tion adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:	
CORE CONSTRUCTION CONSULTANTS, INC.		The new
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	"Co". A professional corpora	rated" or the abbreviation "Corp.," tion name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	(\underline{ss})	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		ASSEE, F
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.	<u>ffice address in Florida, enter t</u> e addres <u>s:</u>	he name of the
Name of New Registered Agent	WA	
	(Florida street address)	-
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:	
I hereby accept the appointment as registered agent. I am	familiar with and accept the obl	igations 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)

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		_	
Add		l	
Remove			
2) Change			
Add			
Remove Change			- 10
Add			(/)
Remove			OF STATI
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)			
N / 1 A			
			
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If an amendment provides for an exchange, reclassification, or cancellation of issued shares.		<u>_</u>	
provisions for implementing the amendment it not contained in the amendment usen.			
(if not applicable, indicate N/A)			
——————————————————————————————————————			
		-	

The data of each amandmant(s) as	03/13/2024			if other than th
The date of each amendment(s) as date this document was signed.	option;		'	n onici man m
•	3/2024			
Effective date <u>if applicable</u> :	0/2024			
	(no more than 90 days after amendment file date)			
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirements, this partment of State's records.	s date w	vill no	t be listed as th
Adoption of Amendment(s)	(CHECK ONE)			
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder a	action a	nd sha	reholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendme Ticient for approval.	ent(s)		
must be separately provided for	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s): For the amendment(s) was/were sufficient for approval	lement		
by	(voting group)			
	(voting group)		~ 3	
04/23/2024 Dated		SALLAHAS!	152 AVR 150	and the second
(Bya)	ector, president or other officer - if directors or officers have not be		=	g
	by an incorporator - if in the hands of a receiver, trustee, or other d	शुक्ष	¥W 10: t	
<u>appoint</u>	ed fiduciary by that fiduciary)	~≥	ŧ-	
	Adrienne P. Moss, Esq.	m	_	
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			