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COVER LETTER

TO: Amendment Section Division of Corporations

	NOT C.	(15	
	ATION: <u>API - FL</u>		
DOCUMENT NUMBE	er: <u>P2500607</u>	1377	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	Puna	Janes 10	
_	170NIACO 3	Name of Contact Person	11
	APT-EL CO	RD	
		Firm/ Company	
	4488 GRAY	Firm/ Company 1-1/AW L STREE Address	= _
_		Address	
	ORANGE (City/ State and Zip Code	65
_		City/ State and Zip Cod	0
_	E-mail address: (to be us	167 @ GMATL	notification)
For further information	concerning this matter, pleas	se call:	
KON JUN	£,	at (de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for i	he following amount made	payable to the Florida Depa	artment of State:
2 \$35 Filing Fee	□\$43.75 Filing Fee &	Flain zamuti ini. w	Desa so en e
✓ 355 raing rec	Certificate of Status	□\$43.75 Filing Fee & Certified Copy	☐\$52,50 Filing Fee Certificate of Status
		(Additional copy is	Certified Copy
		enclosed)	(Additional Copy is enclosed)
31 (1).	va Addagae	e	A. d. danson
Mailing Address Amendment Section		Street Address Amendment Section	
Division 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

API-FL CORP
(Name of Corporation as currently filed with the Florida Dept. of State)
P25000020377
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
API-FL Construction Corp
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: Florida
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)

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 Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	•
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2)Change			
Add			
Remove 3.) Change		_	
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Reniove			
6) Change			
Add			
Кенюуе			

Attach additional sheets, if necessary).	ticles, enter change(s) here; (Be specific)
	
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·	
f an amendment provides for an excl	change, reclassification, or cancellation of issued shares,
(if not applicable, indicate No.1)	endment if not contained in the amendment itself:
17	
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) addate this document was signed.	option:	if other than
• •		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	date)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing require partment of State's records.	ements, this date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sl	nareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the	ne amendment(s)
	roved by the shareholders through voting groups. <i>The job</i> each voting group entitled to vote separately on the amen	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
(By aˈþi selected	rector, president or other officer – if directors or officers I, by an incorporator – if in the hands of a receiver, trusted ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	PRESIPENT (Title of person signing)	

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