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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Bob's Contracting	Company Inc.	
DOCUMENT NUM	IBER: P93000003461		
	s of Amendment and fee are su	abmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Wayne F Richardson		
	,,,,	Name of Contact Persor	1
	Act Accounting & Tax Inc		
		Firm Company	
	13755 N Nebraska Avenue		
		Address	
	Tampa, FL 33613		
		City/ State and Zip Cod	e
	E-mail address: (to be u	sed for future annual report	notification)
for further information	on concerning this matter, pleas	se call:	
Wayne F Richardsol)	813 at (615-2561
Name	of Contact Person	Area Co	_) 615-2561 de & Daytime Telephone Number
inclosed is a check t	or the following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	□\$43.75 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)
An Die P.C	niling Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tullahassee, Fl. 32301

Articles of Amendment to Articles of Incorporation of

(<u>Name of Corporation as currently</u> P93000003461 (Document Number of C	filed with the Florida Dept. of State)	~
(Document Number of C		5
	Corporation (if known)	(
Pursuant to the provisions of section $607,1006$, Florida Statutes, this FR is Articles of Incorporation:	Iorida Profit Corporation adopts the followin	g am e ndment(s
. If amending name, enter the new name of the corporation:		
ame must be distinguishable and contain the word "corporation, Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co ord "chartered," "professional association," or the abbreviation "P.	o'. A professional corporation name must	
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	N/A	
. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
. If amending the registered agent and/or registered office addressinew registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent	N/A·	
tFlorida stree	t address)	-
New Registered Office Address:	. Florida	
		Coder

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 3dd

Example:	ус. ана за	ny Smun, SV-as an Ada.		
X Change	PT	John Doe		
\underline{X} Remove	<u>Y</u>	Mike Jones		
X Add	\underline{SV}	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	1
E) Change	VP	Robert Dellagatta Jr	13203 Blissfield Rd	
Add			Odessa F1, 33556	
N Remove				
2) Change				1
Add				-
Remove				1
3.) Change				_
Add				_
Remove				
4) Change				
Add				-
Remove				<u> </u>
5) Change				
Add				
Remove				
6) (Thange				
Add				
Remove				

The date of each amendment(s) adoption:, i	fother than the
date this document was signed.		
Effective date if applicable:		<u> </u>
	tha more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not Department of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
10/27/20 Dated	017	
Signature X	Robert Rella Salla	
	a director, president or other officer – if directors or officers have not been	
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)	ı
	Robert Dellagatta	1
	(Typed or printed name of person signing)	<u>i</u>
	President	
	(Title of person signing)	