## P93000052111

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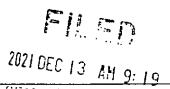


## COVER LETTER

TO: Amendment Section Division of Corporations

	DRATION: CRAY CONSTRU	JCTION & DEVELOPMEN	NT. INC.		
DOCUMENT NUM	1BER: P93000052111	· · · · · · · · · · · · · · · · · · ·			
	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	SCOTT D. CRAY				
		Name of Contact Persor	1		
	CRAY CONSTRUCTION & DEVELOPMENT, INC.				
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company			
	1428 S BRANDYWINE CIRCLE				
	<del></del>	Address			
	FORT MYERS, FLORIDA 33919				
		City/ State and Zip Code	2		
	SDCRAY@OUTLOOK.CO	М			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:	789-5123		
Name	e of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment 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)		
Ai Di P.o	neiding Address nendment Section vision of Corporations D. Box 6327 Illahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

## Articles of Amendment to Articles of Incorporation of



CRAY CONSTRUCTION & DEVELOPMENT, INC.

(Name of Corporation	as currently filed with the F	lorida Depti of State)
P93000052111		及红色的是1000年
(Docume	nt Number of Corporation (if k	nown)
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this <i>Florida Profit Con</i>	poration adopts the following amendment(s)
A. If amending name, enter the new name of the cor	poration:	
name must be distinguishable and contain the word "cor" "Inc.," or Co.," or the designation "Corp," "Inc." "chartered." "professional association," or the abbrevi	or "Co". A professional con	The new orporated" or the abbreviation "Corp" poration name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI	PFCC)	
(Trincipal agrice dadress <u>most be A STREET ADDI</u>	· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	)	<del></del>
	·	
D. If amending the registered agent and/or registere new registered agent and/or the new registered of		iter the name of the
Name of New Registered Agent		<u>.</u>
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept the	e obligations of the position.
Signat	ure of New Registered Agent, ij	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 Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>-</u> <u>sv</u>	Sally Smith	
Type of Action	Title	Name	<u>Addres</u> s
(Check One)  1) Change	V	JAMES H. SCHNEIDER	1428 S BRANDYWINE CIRCLE
X Add			FORT MYERS, FL 33919
Remove			
2) Change			
Add			<del></del>
Remove 3 ) Remove	<u></u>		
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Mach additional sheets, if necessary).	(Be specific)
	_
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
50 10 10 10 10 10 10 10 10 10 10 10 10 10	

The date of each amendment(s) late this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder actio	on and shareholder
The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes east for the amendment(s sufficient for approval.	·)
must be separately provided f	approved by the shateholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes ea	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
Dated Signature	BER 8. 2021	
selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other countinted fiduciary by that fiduciary)	
	SCOTT D. CRAY	
	(Typed or printed name of person signing)	
	PTSD	
	(Title of person signing)	