## P94000073808

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, Fl. 32314

NAME OF CORPOR		MANAGEMENT SERVIC	ES, INC.	
DOCUMENT NUMB	P94000073808 ER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this mat	tter to the following:		
	Duor Seimah			
•	Name of Contact Person			
	2637 E Atlantic Blvd #35093	Firm/ Company	<del> </del>	
	Address			
	Pompano Beach, FL 33062			
		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
duling	@consultant.com			
· · · · ·	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Lindsay Rodriguez		323 at (	877-49 <del>4</del> 2	
Name o	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)	
Ame Divi	ling Address ndment Section sion of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations Building	

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

CONTRACTORS MANAGEMENT SERVICES, INC.

	of Corporation as curr	ently filed with the Florida Dept.	of State)	
P94000073808				
	(Document Numb	er of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes,	this <i>Florida Profit Corporation</i> ado	pts the following ame	endment(s) t
A. If amending name, enter the new na	ime of the corporation	<u>:</u>		
SOTS CONSTRUCTION INC.			Tha	new
name must be distinguishable and con-	tain the word "corpor	ration," "company," or "incorpore		
"Corp.," "Inc.," or Co.," or the design			on name must coup	in the
word "chartered," "professional associa	tion, or the appreviati			
B. Enter new principal office address,	if applicable:	Not Applicable	<u></u>	
(Principal office address MUST BE A S	TREET ADDRESS )		(i) (i)	
			35.	<u> </u>
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		Not Applicable	3	
(Manual and Case (Maria Distriction)	or received,			
			<del></del>	
D. If amending the registered agent an			of the	
new registered agent and/or the nev	Not Applicable	iress:		
Name of New Registered Agent	ТОГАррисавіс			
	(Floria	la street address)		
	Not Applicable			
New Registered Office Address:		, [City]	Florida(Zip Code)	
		(Chy)	(ssp chuc)	
New Registered Agent's Signature, if c	hanging Registered As	ent:		
I hereby accept the appointment as regist			of the position.	
<u>.                                    </u>	Not Applicable			
	Signature of N	ew Registered Agent, if changing		

## 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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		Not Applicable	
Add			
Remove			
2) Change			
Add			<u> </u>
Remove			÷ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
3 ) Change			25 22 5
Add			
Remove			2: 59
4) Change			
Add			
Remove			
5) Change			
Add			· <u>·</u>
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)		
t Applicable		
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No. 1		
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		Wa 21 A0
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	<u>.</u>	
provisions for implementing the amendment if not contained in the amendment itself:	••	⊃o ⊒K
(if not applicable, indicate N/A)		Ŋ
Applicable		ഗ
	20-	<del></del>

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	Applicable	
Effective date <u>if applicable</u> :	Аррисание	
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date we partment of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	;·	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder.	19 NON EL
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	ال ه– ن درب
11/07/2019	) " ·	まっ
Dated	$\frac{1}{2}$	
Signature	irector, president or other officer – if directors or officers have not been	<del></del>
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Duor Seimah	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	