## P95000012409

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
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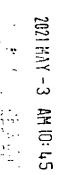
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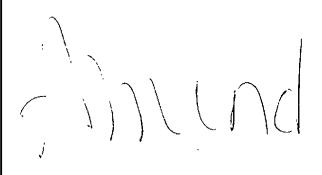


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## **COVER LETTER**

TO: Amendment Section

Division of Corporations Ramage Contracting, Inc. NAME OF CORPORATION: \_ P95000012409 DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Matthew Ramage Name of Contact Person Ramage Contracting, Inc. Firm/ Company PO Box 309 (mailing) - 2898 Harry T. Moore Ave. (physical) Address Mims, FL 32754 City/ State and Zip Code office@ramagecontracting.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (321 ) 269-9716

Area Code & Daytime Telephone Number Maryellen Selbee Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □S43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address **Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## **Articles of Amendment** to Articles of Incorporation of

Ramage Contracting, Inc.		
(Name of Corporation as	currently filed with the Florida De	ept. of State)
P95000012409		
(Document N	umber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	tes, this Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ition:	
N/A		The new
name must be distinguishable and contain the word "corpora" "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	Co". A professional corporation	l" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	207
		= 1
	<del></del>	
C. Enter new mailing address, if applicable:	N/A	ω 1
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
		5
		្នា បា
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		ame of the
N/A Name of New Registered Agent		
Name of New Registerea Agent		<del> </del>
	lorida street address)	
N/A		
New Registered Office Address:	(City)	, Florida (Zip Code)
		• •
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		oue of the position
i nevery accept the appointment as registered agent. I am fe	imiliar wan and accept the onligate	ms of the position.
Signature o	f New Registered Agent, if changing	

Check if applicable

<sup>☐</sup> 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	PT Joh	<u>ın Doe</u>	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Jonathan L. Quinn	5134 Blounts Ridge Rd.
x Add			Mims, FL 32754
Remove			<u> </u>
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
I/A	
	· · · · · · · · · · · · · · · · · · ·
	<del></del>
	·
If an amendment provides for an exch	nange, 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)	
/A	

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The date of each amendment	N/A (s) adoption:	, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	April 21, 2021	
mappineasie.	(no more than 90 days after amend	ment file date)
	his block does not meet the applicable statutory filing the Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors w	vithout shareholder action and shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cere sufficient for approval.	ast for the amendment(s)
	e approved by the shareholders through voting groups d for each voting group entitled to vote separately on	
"The number of votes	cast for the amendment(s) was/were sufficient for app	oroval
by		**
	(voting group)	<del></del> -
April	21. 2021	
Dated		
Signature		
se	y a director, president or other officer – if directors or lected, by an incorporator – if in the hands of a receive pointed fiduciary by that fiduciary)	
	Matthew Ramage	
	(Typed or printed name of person sign	ning)
	Vice President	
	(Title of person signing)	