## P9500027008

(Re	equestor's Name)	
(Ad	ldress)	<del></del>
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	)
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

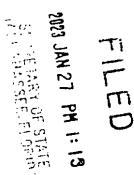
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01/27/23--01026--001 \*\*70.00



A. RAMSEY MAR 3 0 2023

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: EXPO CONVENT	TION CONTRACTORS, IN	NC.
DOCUMENT NUMI	BER:	·	
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	YOLANDA FRIEDMAN		
		Name of Contact Person	1
	EXPO CONVENTION CON	TRACTORS, INC.	
		Firm/ Company	
	15959 NW 15TH AVE		
		Address	
	MIAMI, FL 33169		
		City/ State and Zip Code	e
	YFRIEDMAN@EXPOCCL	СОМ	
		sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	751-1234
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810
1 au	massec, ft. 52514		issee, FL 32303

## Articles of Amendment | LED to Articles of Incorporation of 2023 JAN 27 PM 1: 13

EXPO CONVENTION CONTRACTORS, INC.

(Name	of Corporation as currentl	v filed with the Florida Dept. of State)	<del></del>
P95000027008		THE THEOSER, FLORING	
	(Document Number o	f Corporation (if known)	-
Pursuant to the provisions of section 607.	1006. Florida Statutes, this	Florida Profit Corporation adopts the follo	owing amendment(s)
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
	Corp," "Inc," or "Co", 2	company," or "incorporated" or the abbrev 1 professional corporation name must co	viation "Corp.,"
B. Enter new principal office address,	if applicables	N/A	
(Principal office address MUST BE A S			
C. Enter new mailing address, if appl		N/A	
(Mailing address MAY BE A POST)	<u>OFFICE BON</u> )		
		<u> </u>	·
D. If amending the registered agent an	nd/or registered office add	ress in Florida, enter the name of the	
new registered agent and/or the new			
Name of New Registered Agent	N/A		
	(Florida str	eet address)	
New Registered Office Address:	N/A	, Florida	
			Zip Code)
New Registered Agent's Signature, if c	hanging Degistered Agent		
		with and accept the obligations of the positi	on.
	Signature of New Ro	egistered Agent, if changing	
	G	the state of memo	

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:

tAttach additional sheets, if necessary)

Example:

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>\$V</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	S	_	KEITH LANDBERG	15959 NW 15TH AVE
X Add				MIAMI, FL 33169
Remove				
2) Change		_		
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				<del></del>
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additie	r adding additional Articles nal sheets, if necessary). (B	, enter change(s) he Be specific)	ere:		
					_
	<u></u>			. <u></u>	
<u>f an amendn</u>	ent provides for an exchang	e, reclassification, o	or cancellation of iss	ued shares.	
provisions for	r implementing the amendmolicable, indicate N/A)	ient if not contained	in the amendment	<u>itself:</u>	
1,0	,				
					_
					<u>.</u>

.

	N/A
The date of each amendment(s)	adoption:, if other than t
date this document was signed.	
	23/2023
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament fue date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed as t Department of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
	serve and anticomplete and serve ser
by	·**
	(voting group)
1/23/202 Dated	All
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	RICHARD P. CURRAN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)