

P95000041265

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

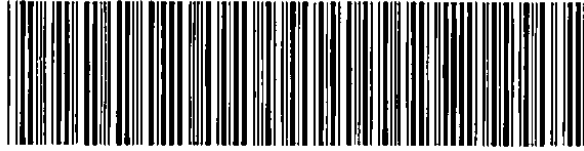
(Document Number)

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Special Instructions to Filing Officer:

Amend

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TALLAHASSEE, FL

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Me

COVER LETTER

: Amendment Section
Division of Corporations

ME OF CORPORATION: ALL COUNTY SURVEYORS INC

CUMENT NUMBER: P95000041265

: enclosed *Articles of Amendment* and fee are submitted for filing.

ase return all correspondence concerning this matter to the following:

SHARA PEREZ

Name of Contact Person

ALL COUNTY SURVEYORS

Firm/ Company

5400 S. UNIVERISTY DR (#216)

Address

DAVIE, FL. 33024

City/ State and Zip Code

SHARA@ALLCOUNTYSURVEYS.COM

E-mail address: (to be used for future annual report notification)

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· further information concerning this matter, please call:

SHARA PEREZ at (954) 777-4747
Name of Contact Person Area Code & Daytime Telephone Number

elosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FL COUNTY SURVEYORS INC

(Name of Corporation as currently filed with the Florida Dept. of State)

5000041265

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to Articles of Incorporation:

If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

1. Enter new principal office address, if applicable:

Principal office address **MUST BE A STREET ADDRESS**

2. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

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D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

removing 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:

(Use additional sheets, if necessary)

Indicate 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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>VP</u>	<u>THOMAS ENGLISH</u>	<u>950 BROKEN SOUND PKWY</u>
<input type="checkbox"/> Add			<u>#601</u>
<input checked="" type="checkbox"/> Remove			<u>BOCA RATON, FL. 33488</u>
2) <input type="checkbox"/> Change	<u>VP</u>	<u>PEDRO LUIS MARTINEZ</u>	<u>7179 W 13TH AVE</u>
<input type="checkbox"/> Add			<u>HIALEAH, FL 33014</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>VP</u>	<u>ROBERT JOHNSON</u>	<u>14790 LAKE OLIVE DR</u>
<input checked="" type="checkbox"/> Add			<u>FORT MYERS, FL. 33919</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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If amending or adding additional Articles, enter change(s) here:

Attach additional sheets, if necessary). (Be specific)

ARTICLE VII

THE OFFICERS OF THE CORPORATION IS AS FOLLOWS:

JAMES A. CAFFALETTE - PRESIDENT

MARIA PEREZ - VICE PRESIDENT/SECRETARY

ANITA WEST - VICE PRESIDENT

FRANCISCO LUIS NUNEZ JR - VICE PRESIDENT

ROBERT B. JOHNSON - VICE PRESIDENT

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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

11/06/2024

date of each amendment(s) adoption: _____, if other than the
this document was signed.

11/06/2024

Effective date if applicable: _____
(no more than 90 days after amendment file date)

: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
amendment's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder
action was not required.

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)
by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. The following statement
must be separately provided for 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)"

Dated 11/06/2024 _____

Signature



(By a director, president or other officer – if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)

SHARA PEREZ

(Typed or printed name of person signing)

VICE PRESIDENT/SECRETARY

(Title of person signing)

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TALLAHASSEE, FL

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