## P960000 18053

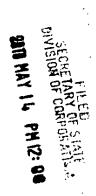
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## **COVER LETTER**

SECRETARY OF STATE

**TO:** Amendment Section Division of Corporations

2018 MAY 14 PM 12: 86

NAME OF CORPORA	TION: SEACREST CON	TRACTORS INC	
DOCUMENT NUMBER			, . ,
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
TI	RELL A ADAMS JR		
		Name of Contact Persor	1
SE	EACREST CONTRACTO	RS INC	
		Firm/ Company	
81	5 SW 2ND STREET		
_		Address	
Во	OCA RATON FLORIDA	33486	
<del></del>		City/ State and Zip Code	
seacresto	contractors@aol.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information o	oncerning this matter, pleas	se call:	
TRELL A ADAMS JR		at ( 561	305-7906
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for th	ne 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)
Amend Divisio P.O. Bo	g Address ment Section n of Corporations ox 6327 ssee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xccutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



200 HAY 14 PH 12: 00

## SEACREST CONTRACTORS INC

(Name of Corporation	as currently filed with the Florida Dept. of State)
P96000018053	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	F9C)
(1 tincipul office uturess <u>most be A Street Abbri</u>	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	l office address in Florida, enter the name of the fice address:
Name of New Registered Agent	
<del> </del>	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register l hereby accept the appointment as registered agent. I a	tered Agent:  am familiar with and accept the obligations of the position.
Signatu	use of New 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 <math>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 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	P	TRELL ADAMS	815 SW 2ND STREET	
Add			BOCA RATON, FL 33486	
X Remove				
2) Change	P	TRELL A ADAMS JR	815 SW 2ND STREET	
X Add			BOCA RATON, FL 33486	
Remove			····	
3) Change			· — · · · · · · · · · · · · · · · · · ·	
Add				
Remove				
4) Change		<u> </u>		
Add				
Remove				
5) Change				
Add				
Remove			···	
6)Change				
Add				
Remove				

(Attach additional sheets, if necessary).	(Be specific)
<u>.,</u>	
<u>, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,</u>	
<del></del>	
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(n	o more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this block does not a document's effective date on the Department of State	neet the applicable statutory filing requirements, this date will not be listed as the te's records.
Adoption of Amendment(s) (CHEC	K ONE)
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appr	reholders. The number of votes cast for the amendment(s) oval.
	areholders through voting groups. The following statement oup entitled to vote separately on the amendment(s):
"The number of votes cast for the amendm	ent(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(voting	group)
☐ The amendment(s) was/were adopted by the boa action was not required.	rd of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the incoaction was not required.	orporators without shareholder action and shareholder
	nter other efficer – if directors or officers have not been rator – if in the hands of a receiver, trustee, or other court that fiduciary)
TRELL A AD	AMS JR
(Ty <sub>l</sub>	ped or printed name of person signing)
PRESIDENT	
	(Title of person signing)