P97000032047

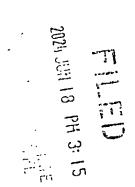
(Red	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: TRACY ACREE C	ONSTRUCTION	N. INC.				
DOCUMENT NUME	BER: P97000032097						
	of Amendment and fee are su	bmitted for filing.	•				
Please return all corres	spondence concerning this mat	tter to the followi	ng:				
	JOHN S. MEAD, ESQUIRE						
	 	Name of Cont	act Person				
	MEAD LAW & TITLE, PLLC						
	Firm/ Company						
	24 WALTER MARTIN RD 1	NE, SUITE 201					
		Addre	:SS	_			
	FORT WALTON BEACH, F	L 32548					
		City/ State and	l Zip Code				
	E-mail address: (to be us	ed for future anni	ual report r	notification)			
For further informatio	n concerning this matter, pleas	se call:					
JOHN S. MEAD		at (50	243-3135			
Name o	of Contact Person	aı(e & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made p	payable to the Flo	orida Depai	tment of State:			
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Cop (Additional co enclosed)	oỳ. -	☐\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Amo Divi P.O.	ling Address Indiment Section Ission of Corporations Box 6327 Ishassee, FL 32314		Division The Ce 2415 N	address nent Section tof Corporations ntre of Tallahassee . Monroe Street, Suite 810 (see, FL 32303			

Articles of Amendment Articles of Incorporation of

with the Florida Dept. of State) 2: 18 PH 3
<u>'''</u>
<u>'''</u>
Oration (if known)
a Profit Corporation adopts the following amendment(s
The new
ny," or "incorporated" or the abbreviation "Corp.," essional corporation name must contain the word
1/A
ALC
Florida, enter the name of the
Piorida, enter the name of the

ressi
reasy
, Florida
(Zip Code)

☐ 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)

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>c</u>	
X Remove	\underline{V}	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	MGR	_	Gavin Wolff	P.O. Box 2492
X Add				Fort Walton Beach, FL 32549
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add			•	
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
				
Remove				

E. If amending or ac	dding additional Art sheets, if necessary).	icles, enter change	e(s) here:			
NIA		(Be specific)				
NIK				. .	-	
						
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				• • • •		
<u>-</u>			· -			
 						
			_		•	-
		-		_		
	 .			·		
F. <u>If an amendment</u>	nravides for an eve	hanue reclassifica	tion or cancella	tion of issued sho	ırac	
provisions for in	iplementing the am	endment if not con	tained in the am	endment itself:	11 (3)	
(if not applic	able, indicate N/A)					
NIA						
•						_
	-		 .			<u> </u>
						
						
				-		
						

•

The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment fil	e date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requiepartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without	shareholder action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for ufficient for approval.	the amendment(s)
	proved by the shareholders through voting groups. The for each voting group entitled to vote separately on the ame	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
solecte	Annette Jane. director, president or other officer – if directors or officers ed, by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	ce, or other court
	JOHNETTE J. ACREE (Typed or printed name of person signing)	<u> </u>
	VICE PRESIDENT (Title of person signing)	