P97000045078

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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SECTION OF CORPORATIONS
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WALOS SULP HE

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

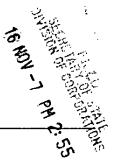
Tallahassee, FL 32314

NAME OF CORPO	RATION: Mike Petros Const	ruction, Inc	
DOCUMENT NUM	BER: P97000045078		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Karen Petros		
	<u></u>	Name of Contact Person	n
	Mike Petros Construction, In	ıc	
		Firm/ Company	
	1802 S.E. 11th Pl		
		Address	
	Cape Coral, Fl 33990		
		City/ State and Zip Cod	e
il-a			
mike	petrosconstruction@aol.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Karen Petros		at (239	233-0836
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)
	iling Address		Address
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
		7 IDIC	~~-p~~~~~

Clifton Building

2661 Executive Center Circle Tailahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Mike Petros Construction, Inc

(Name of Corporation	on as currently filed with the Florida Dept. of State)	—— '' ——————————————————————————————————
P97000045078	on as currently med with the Florida Dept. of State)	<i>S</i> 3
(Docum	nent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following a	amendment(s) to
A. If amending name, enter the new name of the col	rporation;	
$\cap A$	7	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the d	d "corporation," "company," or "incorporated" or the abb " "Inc," or "Co". A professional corporation name must co	reviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD		

C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>x</u>)	
D. If amending the registered agent and/or registered	ed office address in Florida, enter the name of the	
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent	7 A	
Mathematical Control of Control o	(Florida street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Cod	de)
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.	

Signature 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)

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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	S	Michael S. Petros	133 SE 4 Ave
Add			Cape Coral, Fl 33990
Remove			
2)Change		n/a	
Add		·	
Remove		n).	
3) Change			
Add			
4) Change		_nla	
Add		1.	
Remove			
5) Change	***********	n/A	
Add		1	<u></u>
Remove			
6) Change		n/A	
Add		1	
Remove			

(Attach additional sheets	additional Articles, enter c c, if necessary). (Be specifi	(c)		
		- <u> </u>		
	····			······································
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If an amendment provi provisions for implem (if not applicable,		sification, or cancellation of contained in the ame	on of issued shares, ndment itself:	****
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No.	ovember 4, 2016	
The date of each amendment(s) adoption: date this document was signed.		_, if other than the
Effective date if applicable:		
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does n document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will State's records.	not be listed as the
Adoption of Amendment(s) (CH	IECK ONE)	
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amendment(s) approval.	
	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
	ndment(s) was/were sufficient for approval	
by	ting group)	
(vo.	ting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	
11/4/2016		
DatedSignatureSignature	Petro	
	ident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary		
Karen Petro	os	
	(Typed or printed name of person signing)	
VP		
	(Title of person signing)	