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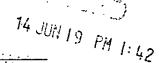
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Innnovative	Construction of	f Naples, Inc		
DOCUMENT NUM	_{BER:} P9700008637	9			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Barry Gerber				
	Name of Contact Person				
	Innovative Construction of Naples, Inc				
	Firm/ Company				
	511 Dewhurst	, and Company			
	Address				
	Port Charlotte FL	33948			
		City/ State and Zip Code	e		
D.C	Corb 11 @ ool oom				
	Gerb41@aol.com	sed for future annual report	notification)		
	E-man address, (to be di	sed for future annual report	nouncation)		
For further information	on concerning this matter, pleas	se call:			
Barrry Gerbe	er	at (941	5857572		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed 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)		
	iling Address		Address		
Amendment Section		Amendment Section Division of Corporations			
Division of Corporations P.O. Box 6327		Clifton Building			
		Executive Center Circle			
Tallahassee, FL 32301		assee, FL 32301			

Articles of Amendment **Articles of Incorporation**



Innovative Construction of Naples, Inc

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

P97000086379

(Document Number of Corporation (if known)

novative Construction of Pune must be distinguishable and contain the corp." "Inc." or Co." or the designation."	e word "corporation," "company," or "inc "Corp," "Inc," or "Co". A professional co	corporated" or the all
rd "chartered," "professional association," o		,
Enter new principal office address, if appli incipal office address <u>MUST BE A STREET</u>		
	-,, ,	
Fatan ann mailine addussa if annliashla.	.	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	CE BOX)	
		
		
	egistered office address in Florida, enter the	name of the
If amending the registered agent and/or re new registered agent and/or the new registered		name of the
		name of the
new registered agent and/or the new regist		name of the
new registered agent and/or the new regist	tered office address: (Florida street address)	rida
new registered agent and/or the new regist Name of New Registered Agent	tered office address: (Florida street address)	

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 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:		ay smith, 5+ as an riad.	
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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	, to the second
· · - · ·	
<u></u>	
	
	11
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		·
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 6 -	17-14)	
Signature	Follow Comments	
	irector, president or other officer – if directors or officers have not been	
	d. by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
аруюн	BARRY F. GERBER (Typed or printed name of person signing)	_
	(Typed or printed name of person signing)	
	PRES (Title of person signing)	
	(Title of person signing)	