## P98000101243

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,
(City/State/Zip/Phone #)
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(Business Entity Name)
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•	COVER LETTER
TO: Amendment Section Division of Corporations	• ,
NAME OF CORPORATION: R. M. H. DOCUMENT NUMBER: A 9800010	HTON INC.
DOCUMENT NUMBER: # 98000/0	1243
The enclosed Articles of Amendment and fee are sub-	nitted for filing.
Please return all correspondence concerning this matter	er to the following:
	Name of Contact Person  ON Fac.  Firm/ Company  SWINS RS.  Address  FLA 3424  City/ State and Zip Code  144 DEMINICAL ADM  I for future annual report notitication)
For further information concerning this matter, please	cali:
RICH HINTON	at ( 94/ ) 323 - 3144 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	✓S43.75 Filing Fee & ☐\$52.50 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

A	rtic	les	of	Incorpora	tion
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	of	
R.M. HINTON INC.		
(Name of Corporation as currer	ntly filed with the Florida	Dept. of State)
P 98000101243		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporati	on adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
PRO ACTIVE CONSTRUCTION I	MC.	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". "chartered," "professional association," or the abbreviation "P.A	- company, or incorpora - A professional corporati	uea - or the appreviation - Corp.,
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	1175 SAAAS	OTA CENTER BLUB.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		FLA 34240 OFA CENTED BLUD. FLA: 34240
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		e name of the
Name of New Registered Agent 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:

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

Check if applicable

 $<sup>\</sup>Box$  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 Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	_\	JERRY SLETHITS	1175 CEHTER GATE BLUB
X_ Add			SARASOM FLA 34240
Remove			
2) Change			
Add			
Remove 3 + Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheet:	s, if necessary). (Be specifi	ic)		
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an amendment new	ides for an exchange, reclas	erification or concellati	an af icenad charac	
	nenting the amendment if n			
(if not applicable,	indicate N/A)			
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The date of each amendment(	adoption:, if other than th
date this document was signed	
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
Signature	10 - 20  Out Hards  a director, president or other officer – if directors or officers have not been
sel	eted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	PRES.
	(Title of person signing)