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SECRETARY OF STATE

ALLAHASSEE: PH ORIGINA

## **COVER LETTER**

1

TO: Amendment Section
Division of Corporations

NAME OF CORPOR.	ATION: NATIONS CONS	TRUCTION INC		
DOCUMENT NUMBI	E <b>R:</b> P99000004178			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
•	YUVAL FADLON			
_		Name of Contact Person	1	
ı	NATIONS CONSTRUCTIO	N INC		
-		Firm/ Company		
4	70 ANSIN BLVD #AA			
_		Address	•••	
1	HALLANDALE FL 33009			
_		City/ State and Zip Cod	e	
NATIO	ONSCONSTRUCTION@YA	AHOO.COM		
	•	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
YUVAL FADLON		at (	838-7555	
YUVAL FADLON at (786 ) 838-7555  Name of Contact Person Area Code & Daytime Telephone Num				
Enclosed is a check for	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)	
Amer Divis P.O.	ing Address Indment Section Identification of Corporations Box 6327 Index 632314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

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(Name of Corporation as curre	ently filed with the Florida De	pt. of State)
P99000004178		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	<u>.</u>	
N/A		The new
name must be distinguishable and contain the word "corpord" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviation	or "Co". A professional corpo	porated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
		· Zo =
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	ALCOHOLD FILE
(		3 E
	4.0.000	7 2 D
	<u> </u>	001 2: 01 2:
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add		ame of the
	11055	•
Name of New Registered Agent		
(Florid	a street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Office Address:	(City)	, Florida
New Registered Agent's Signature, if changing Registered Ag	ent.	
I hereby accept the appointment as registered agent. I am famili	iar with and accept the obligation	ons of the position.
Signature of Ne	w Registered Agent, if changing	3

4

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: X Change	<u>PT</u>	John Doe	
X Remove	Y	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	CHRISTINA NAULT	470 ANSIN BLVD UNIT #AA
Add			HALLANDALE FL, 33009
X 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 adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)
N/A
IVA
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate $N/A$ )
N/A

N/A	10 4 4
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dedocument's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.	s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	er
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
09/05/2017 Dated	
Signature  (By a director, president or other officer—if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other cou appointed fiduciary by that fiduciary)	
YUVAL FADLON	
(Typed or printed name of person signing)	
PD	
(Title of person signing)	