## P9900000 9214

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Boulais Builders Corp.				
DOCUMENT NUMBER: P 9900000 9214				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
James Boulais Name of Contact Person				
Boulais Builders Corp. Firm Company				
5500 S.W. 8 street				
Margate F1. 33068  City/ State and Zip Code				
Boulais builders CAOL. Com  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
James Boulais at 954, 336 8312  Name of Contact Person Area Code & Daytime Telephone Number				
Name of Contact Person Area Code & Daytime Telephone Number				

Enclosed is a check for the following amount made payable to the Florida Department of State:

□\$43.75 Filing Fee &

Certificate of Status

**Mailing Address** 

\$35 Filing Fee

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

☐\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

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## Articles of Amendment

to

## Articles of Incorporation

of

Boulais Builders	οιρ filed with the Florida Dept. of State)
(Name of Corporation as currently	filed with the Florida Dept. of State)
P 99000009214	
(Document Number of O	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fi</i> its Articles of Incorporation:	dorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N-A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N - A
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent \( \sum_{-} \)	<del>9</del> = 3 = 4
(Florida street	address)
New Registered Office Address: (Co	Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with  Signature of New Regis	th and accept the obligations of the position.
	метеа Agent, ң changing
Check if applicable  ☐ 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)

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: XChange	PT	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change		Joseph Verdecanna	5500 sw 8 street
_X Add			Morgate Fl.
Remove		_	33068
2) Change			
Add		_	
Remove 3 ) Change			
Add		_	
Remove			
4) Сһапде			
Add			
Remove		_	
5) Change			
Add			
Remove		_	
6) Change			
Add			
Remove		_	

tach additional sheets. if necessary). (Be specific)  N - A	
<u>N - H</u>	
<del></del>	
	• • • • • • • • • • • • • • • • • • • •
an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
rovisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
N - A	
	-

Company of the second

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days aft	er amendment file date)
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	itory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of a action was not required.	lirectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voti- must be separately provided for each voting group entitled to vote sepa	
"The number of votes cast for the amendment(s) was/were sufficient	ent for approval
by	"
(voting group)	
Dated 1 - 23 - 2020	
Signature  (By a director, president or other officer – if directed, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	rectors or officers have not been fa receiver, trustee, or other court
James M. Bo (Typed or printed name of p	olais
_	erson signing)
President	
(Title of person signing)	· · · · · · · · · · · · · · · · · · ·