## P99000 105651

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION: K T Carter Contrac	eting, Inc.	
	*BER: P99000105651		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Rob Hidenrick		
	<del> </del>	Name of Contact Person	•
	K T Carter Contracting, Inc.		
		Firm/ Company	
	1909 Beaver Street East		
	<del> </del>	Address	
	Jacksonville, Florida 32202		
		City/ State and Zip Code	:
	rob@ktcarter.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat Rob Hidenrick	ion concerning this matter, pleas		354-9999
Nam	e of Contact Person	Area Coc	le & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303

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## Articles of Amendment to Articles of Incorporation of

K T Contracting, Inc.	To the state of th
(Name	of Corporation as currently filed with the Florida Dept. of State)
P99000105651	.,9
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendm
A. If amending name, enter the new n	ame of the corporation:
	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association,"	n the word "corporation," "company," or "incorporated" or the abbreviation "Corp., Corp," "Inc," or "Co". A professional corporation name must contain the wor " or the abbreviation "P.A."
B. Enter new principal office address, (Principal office address MUST BE A S	
	nd/or registered office address in Florida, enter the name of the
new registered agent and/or the new	
Name of New Registered Agent	Robert Hidenrick
	1909 Beaver Street East
	(Florida street address)
New Registered Office Address:	Jacksonville . Florida 32202
	(City) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	tered agent. I am familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if 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: 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	Name	<u>Addres</u> s
X Change	C	Kevin T. Carter	1909 Beaver Street East
Add			Jacksonville, Florida 32202
Remove			
2) Change	P	Robert Hidenrick	1909 Beaver Street East
X Add			Jacksonville, Florida 32202
Remove 3) Change	<del>~~~</del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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)	(Attach addition	or adding additional Articles, enter change(s) here: onal sheets, if necessary). (Be specific)	
. 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:	(/ macin minimize	and solicitally processing the appropries	
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	4/24/20
The date of each	amendment(s) adoption:, if other than
date this documen	
•	4/24/20
Effective date if a	
	(no more than 90 days after amendment file date)
	inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ive date on the Department of State's records.
Adoption of Ame	endment(s) (CHECK ONE)
The amendmen action was not	at(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder required.
	at(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ders was/were sufficient for approval.
☐ The amendmer must be separa	et(s) was/were approved by the shareholders through voting groups. The following statement ately provided for each voting group entitled to vote separately on the amendment(s):
"The nun	nber of votes cast for the amendment(s) was/were sufficient for approval
by	
	(voting group)
	4/24/20 Dated
	Signature Tull Addit
	(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 court
	appointed fiduciary by that fiduciary)
	Robert Hidenrick
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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