506987

| (Re | equestor's Name) | | | |
|---|-------------------|-------------|--|--|
| (Ad | ldress) | | | |
| (Ac | dress) | | | |
| (Cir | ty/State/Zip/Phon | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Ви | usiness Entity Na | me) | | |
| (Do | ocument Number |) | | |
| Certified Copies | _ Certificate | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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14 JAN-9 AM 9: 22

SECREINBY OF STALE

Office Use Only

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COVER LETTER

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TO: Amendment Section

| Division of Corporations | | | | | | |
|---|---|--|--|--|--|--|
| NAME OF CORPORATION: LIND ACK DOCUMENT NUMBER: S06987 | CONSTRUCTION C | | | | | |
| The enclosed Articles of Amendment and fee are submitted for fi | iling. | | | | | |
| Please return all correspondence concerning this matter to the fol | - lowing | | | | | |
| Treate results an correspondence concerning and maner to the for | | | | | | |
| CARL LINAL Name of | A CK Contact Person | | | | | |
| Firm | Company | | | | | |
| Firm/Company 2120 SUNNY CALE BLVd #8 Address | | | | | | |
| CLEARWATER FL 33765 City/ State and Zip Code | | | | | | |
| E-mail address: (to be bed for future | annual report notification) | | | | | |
| For further information concerning this matter, please call: | | | | | | |
| Carl Lindhack a | 1 (<u>305</u>) <u>522</u> <u>2718</u> Area Code & Daytime Telephone Number | | | | | |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | | | | | | |
| Enclosed is a check for the following amount made payable to the | or forma Department of State. | | | | | |
| Certificate of Status Certified (Addition | Filing Fee & Status Copy Certificate of Status Certified Copy (Additional Copy is enclosed) | | | | | |
| Mailing Address | Street Address | | | | | |
| Amendment Section | Amendment Section | | | | | |
| Division of Corporations Division of Corporations | | | | | | |
| P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle | | | | | | |
| Tananasse, TE 52514 | 2001 Executive Center Choic | | | | | |

Tallahassee, FL 32301

APPROVEU AND FILED

Articles of Amendment to Articles of Incorporation

14 JAN -9 AM 9: 22

| | Articles of Incom | rporation | . • | 2 HU 2:55 |
|--|-----------------------------|------------------------|---------------------|--|
| , , , , , | of | | SECT | ETARY OF STATE |
| LINdbAck | ConsTri | CTION | Co. TALLY | HASSEE, FLORID. |
| (Name of Corporation as curr | ently filed with the Flo | | | |
| 500 | 6987 | | | |
| | mber of Corporation (if k | (nown) | | |
| · | · | | | |
| arsuant to the provisions of section 607.1006. S Articles of Incorporation: | , Florida Statutes, this Fl | orida Profit Corpora | ation adopts the fo | ollowing amendment(s |
| . If amending name, enter the new name o | f the corporation: | | | |
| 727 MANAS | EMENT | Comon | w V | The new |
| ame must be distinguishable and contain | the word "corporation, | " "company," or "i | incorporated" or | the abbreviation |
| Corp.," "Inc.," or Co.," or the designation or chartered," "professional association, | "Corp," "Inc," or "Co | o". A professional c | corporation name | must contain the |
| | | | | 1 - 21 1 |
| . Enter new principal office address, if app Principal office address <u>MUST BE A STREI</u> | | <u>2120 3</u> | UNIVYCA | FIE DLVd |
| rincipui ojjice uuuress <u>MOSI BE A SIREI</u> | <u>:1 ADDRESS</u>) | #8 | | |
| | | (2) | T | <u>LE</u> BLUL <u>L. 3</u> 3765 |
| | | CLEARWA | -11= 1- | h. 33/65 |
| . Enter new mailing address, if applicable | : | | | |
| (Mailing address <u>MAY BE A POST OFF</u>) | | | | |
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| | | | | |
| | | | | |
| | 1.00 | | | |
| . If amending the registered agent and/or new registered agent and/or the new reg | | is in Florida, enter t | ne name of the | |
| | n / M | | | |
| Name of New Registered Agent | 14/4 | | | |
| | | | | |
| | (Florida stree | i address) | | |
| New Registered Office Address: | | , F | Florida | |
| - | (City) | | (Zip Ca | ide) |
| | | | | |
| | | | | |
| | | | | |
| hereby accept the appointment as registered | agent. I am familiar wii | th and accept the obli | igations of the po | iition. |
| New Registered Agent's Signature, if changing the second the appointment as registered to the appointment as a regi | | th and accept the obli | igations of the po: | sition. |

Signature of New Registered Agent, if changing

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) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | | N/R | |
| Add | | / | |
| Remove | | | |
| 2) Change | | <u> </u> | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| [| | | |
| Remove | | | **** |

| ttach <i>additional sh</i> | ing additional Ar leets, if necessary). | | ge(s) here: | | |
|---------------------------------------|--|--------------------|--------------------|--------------------|--------------|
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| | | n // 0 | | | |
| | | N/A | | | |
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| an amendment n | rovides for an exc | change reclassific | ation, or cancella | tion of issued sha | res |
| rovisions for imp | lementing the am | endment if not co | ntained in the am | endment itself: | 11 034 |
| (if not applicab | ole, indicate N/A) | | | | |
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| ··· · · · · · · · · · · · · · · · · · | Y | 1// | | | |
| | | V/A | | | |
| | | V/A | <u>.</u> | · | |
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| | <i></i> | V/P | | | |
| | <i></i> | V/B | | | |
| | <i></i> | V/B | | | |
| | <i></i> | V/P | | | |

| | | | APPROVEU AND FILED |
|---|---|--------------------------------------|--|
| The date of each amendment(s) adoption: date this document was signed. | January | 1,2014 | 14 JAN if other than the |
| Effective date <u>if applicable</u> : | (no more than 30 days a | L 2D14 Ifter amendment file date) | PALE HARY DESTATE PALE HIT SSEE, FLORID |
| Adoption of Amendment(s) | CHECK ONE) | | |
| The amendment(s) was/were adopted by by the shareholders was/were sufficient to | | of votes cast for the amer | ndment(s) |
| The amendment(s) was/were approved by must be separately provided for each vol | | | |
| "The number of votes cast for the a | mendment(s) was/were suffici | ent for approval | |
| by | | .,,, | |
| | (voting group) | | |
| The amendment(s) was/were adopted by action was not required. | the board of directors without | shareholder action and sh | ıareholder |
| The amendment(s) was/were adopted by action was not required. | the incorporators without shar | eholder action and shareh | older |
| Dated / _ / | 2014 0 D ON O | | |
| Signature <u>Car</u> | & Linelbourh | Pres. | ** |
| selected, by an | president or other officer – if d incorporator – if in the hands of iary by that fiduciary) | | |
| C | Ar L L (W C | Lhack | ···· |
| | (Typed or printed na | ame of person signing) | |
| | Pres | | |

(Title of person signing)