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MAY 20 2019

S. YOUNG

COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPORATION: \overline{I}	Top Construction, Inc.
DOCUMENT NUMBER:	1
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concernin	g this matter to the following:
TIP 1 1 E-mail address	Teff Die Mman Name of Contact Person TOP CONSTRUCTION Firm/ Company PO BOX I W Address Havana, FL 32333 City/ State and Zip Code to belused for future annual report notification)
For further information concerning this ma	tter, please call:
Jeff Die Mman Name of Contact Person	at (850) 502-1269 Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	int made payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Certificate of	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

TIP TOP COnstruct	tion. Inc	
Name of Corporation as current	tly filed with the Florida Dept.	of State)
(Document Number of	of Corporation (if known)	·
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation ado	pts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporati	ited" or the abbreviation on name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	1-9 Pt 6 48
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address Name of New Registered Agent		of the
New Registered Office Address: Havana	treet address) (City)	Florida_ <u>32333</u> (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar Signature of New	t: with and accept the obligations of the control o	of the position.

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> <u>Joh</u>	in Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	S	Shirley Diekman	47 King's Court Havana, [L 32333
Add Remove			<u> </u>
2) Change Add	D	Justin Diekman	338 Tall Timbers Pd Havana, FL 32333
Remove 3) Change Add	CEO	Brandy Davidson	126 San Bonita Ct. Havana, Fl 32333
Remove 4) Change			
Add			
5) Change			
Remove			
6) Change			
Add Remove			

E. If amending or adding additional Articles, enter change (Attach additional sheets, if necessary). (Be specific)	(s) herc:
N/A	
F. If an amendment provides for an exchange, reclassificat	tion, or cancellation of issued shares,
provisions for implementing the amendment if not con (if not applicable, indicate N/A)	tained in the amendment itself:
N/A	

The date of each amendment(s) adoption:	, if other than the
N//A	
Effective date if applicable: 1 V / I \ (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date 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.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement ement
"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 shareholder action was not required.	older
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 5/8/19 Signature	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	
Teff Diekman (Typed or printed name of person signing)	
President (Title of person signing)	