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COVER LETTER

NAME OF CORPORATION: O. B. Lauront Construction, Inc. DOCUMENT NUMBER: _____ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mary Catherine Disney Name of Contact Person Firm/ Company PRINGS FC 32435
City State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Son Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2017 DEC 25 PM 3: 54

O.B. LAURENT CONSTRUCTION, INC.

U.B. LAI	ORENT CONSTRUCTION, INC.
(Name of Corporat	ion as currently filed with the Florida Dept. of State)
	S94097
(Document)	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the c	orporation:
	The new
	rd "corporation," "company," or "incorporated" or the abbreviation o," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable	e:
(Principal office address MUST BE A STREET AD	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>DX</u>)
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, enter the name of the doffice address:
Name of New Registered Agent	
	(Florida street address)
	The same cary
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re	gistered Agent:
	I am familiar with and accept the obligations of the position.

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: XChange	PT John	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones ,	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P.D	Olex Benoit Laurent	•
Add Remove			Samla Resa Beach, Fr 32459
2) Change	1	Key Laurent	1355 Bay Drive
Add Remove			Senta Rosa Brach, Fr 32459
3) Khange	?	Warren Laurent	131 DeFuniak St.
Add			Santa Rusa Beach Fz, 32459
4) Khange	VP	Charles B. Laurent	131 DeFunizk St.
Add			Santa Rosa Beach FL 32459
5) Change			
Add			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
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provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
· · · · · · · · · · · · · · · · · · ·		
	<u> </u>	

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable: 122117	
Effective date if applicable: (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 date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"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.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12/21/17	
Signature Kay Laurent	
(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)	
Kay Lauvent (Typed or printed name of person signing)	
Director	
(Title of person signing)	•