## P01000106006

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C. LEWIS

OCT 8 2013

EXAMINER

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: NEW HORIZON BER: P0100010600		REMODELLING INC		
The enclosed Articles	of Amendment and fee are sul	omitted for filing.			
Please return all correspondence concerning this matter to the following:					
	SCOTT E. ITKIN				
		Name of Contact Person	l .		
	SOUTH FLORIDA TAX				
		Firm/ Company			
	9480 EDEN MANOR				
	Address				
	DAVIE, FL 33328	3			
		City/ State and Zip Code	2		
SD	LP40@HOTMAIL	COM			
		ed for future annual report	notification)		
	•	·			
For further informatio	n concerning this matter, pleas	e call:			
SCOTT E. IT	·KINI	954	458-2000		
	of Contact Person	at ( 304	de & Daytime Telephone Number		
name	of Contact Person	Alea Co	de & 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 & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	iling Address		Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327		Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301			
		i anana	33CC, 1 L 343V I		

## Articles of Amendment to Articles of Incorporation

FILED

## NEW HORIZON CONSTRUCTION & REMODELING, INC. 13 SEP 27

13 SEP 27 PM 2: 00

(Name of Corporation as currently filed with the Florida Dept. of State)

P01000106002

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association." or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered 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 <math>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	<u>Name</u>	<u>Addres</u> s	
1) Change	V	FIRDIE CHRISTIAN	9480 EDEN MANOR	
X Add			PARKLAND, FL 33076	
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove			····	
4) Change				
Add				
Remove				
5) Change				
Add			····	
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here:				
(Attach additional sheets, if necessary).	(Be specific)			
N/A				
	· · · · · · · · · · · · · · · · · · ·			
D 16 1	To the attended to the second above			
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:			
(if not applicable, indicate N/A)	nument it not contained in the amendment users.			
N/A				
IN/A				
12 31 3514				

The date of each amendment	(s) adoption: SEPTEMBER 26, 2013	Flif of her than th
date this document was signed  Effective date if applicable:	UPON FILING	13 SEP 27 PM 2 2
<del></del> -	(no more than 90 days after amendment file date)	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	LOMIDA
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amenere sufficient for approval.	dment(s)
☐ The amendment(s) was/wer must be separately provide	e approved by the shareholders through voting groups. The following d for each voting group entitled to vote separately on the amendment	statement 's):
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and sha	ıreholder
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareho	lder
SE Dated	PTEMBER 26, 2013	
Signature 👤	PTEMBER 26, 2013 Degne Dranfoste	
(B	y a director, president or other officer – if directors or officers have no lected, by an incorporator – if in the hands of a receiver, trustee, or oth pointed fiduciary by that fiduciary)	
	SEGNER DIEUJUSTE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	