

Florida Department of State Division of Corporations

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COR AMND/RESTATE/CORRECT OR O/D RESIGN TRIPLE CROWN FINISHED CARPENTRY, INC.

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Page 1 of 3

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 fitle, name, and address of each Officer and/or Director being added; H110002170333 (Attach additional sheets, if necessary) <u>Address</u> Type of Action Title <u>Name</u> Т NUNZIO TALLUTO **4823 SW 17TH AVENUE** ☑ Add ☐ Remove CAPE CORAL, FL 33914 □ Add ☐ Remove Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. 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)

The date of each amendment(s) as	doption: SEPTEMBER 01, 2011	
	(date of adoption is required)	H11000217033 3
Effective date if applicable:	more than 90 days after amendment file date)	<u> </u>
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Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes caufficient for approval.	st for the amendment(s)
	proved by the shareholders through voting groups. each voting group entitled to vote separately on th	
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by	ing group)	
action was not required.	opted by the board of directors without sharcholder	
Dated09/01	/2011	
Signature	Not tallax	
selected,	ector, president or other officer - if directors or off by an incorporator - if in the hands of a receiver, t d fiduciary by that fiduciary)	
	Vito Talluto	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
_	President	***
	(Title of person signing)	