(Re	questor's Name)	
- (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300180207163

05/05/10--01031--010 **35.00

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORI	PORATION:	Xceed Builder, Inc.			
DOCUMENT NUMBER:		P10000011295	···		
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.			
Please return all co	orrespondence concerning thi	is matter to the following:			
		Crystal Pinard			
	N	lame of Contact Person			
	X	ceed Builders, Inc.	· 		
		Firm/ Company			
	3389	Sheridan Street, #257			
		Address			
	Holly	wood, Florida 33021			
	C	ity/ State and Zip Code			
_	rick@x E-mail address: (to be use	ceedbuilder.com d for future annual report notification)			
For further inform	ation concerning this matter,	please call:			
	Crystal Pinard	at (5-7836		
Name	e of Contact Person	Area Code & Daytime Tele	phone Number		
Enclosed is a chec	k for the following amount n	nade payable to the Florida Departr	nent 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)		
Mailing A		Street Address Amendment Section			
Amendment Section Division of Corporations		Division of Corporations			
P.O. Box 6		Clifton Building 2661 Executive Center Circle			
i allaliasse	e, FL 32314	ZOUT DACCULIVE CEITER CITCLE			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

IC.	
the Florida Dept. of State)	
5	
tion (if known)	
ites, this Florida Profit Corporation adopts the	
on:	
OC. The r	
poration," "company," or "incorporated" or Corp," "Inc," or "Co". A professional corporatiation," or the abbreviation "P.A."	
3389 Sheridan Street, #257	
Hollywood, Florida 33021	
3389 Sheridan Street, #257	
Hollywood, Florida 33021	
e address in Florida, enter the name of the ddress:	
rida street address)	
, Florida, (Zip Code)	

If amunding 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			☐ Add ☐ Remove
			_
			☐ Add☐ Remove
	nding or adding additional Article additional sheets, if necessary). (
			1.00
provis	nmendment provides for an excha tions for implementing the amend that applicable, indicate N/A)		
		- 48 BASE W	

The Gate of each amendment(s) adoption: 5/4/W/O
(date of adoption is required) Effective date if applicable: 5/5/2010
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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)
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 5/4/2010
Signature (By a directo), 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)
Crystal Pinard
(Typed or printed name of person signing)
President
(Title of person signing)