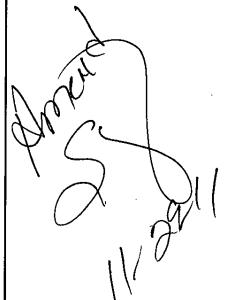


(Re	questor's Name)	`
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<i>⇒#</i>)
PICK-UP	WAIT	MAIL
· (Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
	Office Use Onl	



11/28/11--01025--003 **52.50





COVER LETTER

Florida

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Perkins Industries Int of North
DOCUMENT NUMBER: P110000 92745
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BRENNAN R. PERKINS Name of Contact Person
Perkins Industries INC of North Florida
280 Springfield Court
ORange Park F1 32073 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
BRENNAN R. PERKINS at (904) 352-6203 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)

Mailing Address
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

Articles of Incorpor	ation
Perkins Industries-	Inc of North Florida
(Name of Corporation as currently filed with the F	orida Dept. of State)
P1100009279	45
(Document Number of Corporation (it	'known)
Pursuant to the provisions of section 607.1006, Florida Statutes, that amendment(s) to its Articles of Incorporation:	nis Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
The new name must be distinguishable and contain the word "corporabbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," name must contain the word "chartered," "professional association,	"Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ELANASSES LES
D. If amending the registered agent and/or registered office address: Name of New Registered Agent:	
Name of New Registered Agent.	
(Florida stre	et address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.

Signature of New Registered Agent, if changing

the record to be	. Please i an index	ndicate the title(s), name and add	lress for e	rs/directors of the corporation as you now want ach officer/director. re than 6 officers/directors, please list them on an
		Name		Address
1) PRESideNT	<i>†</i>	BRENWAN R. PERK	<u>.</u>	280 Springfield (+ ORANGE PORK, FL
2) Vice Preside	dent	TERRY James Whi	te, se	280 Springfield (+ ORANGE PARK, FL 32073 1013 Cahoon RJ. S. Jacksonville, FL 32221 7368 KNotty Pine Ave. Winter Park, FL
3) Secretary	7	Terry James White,	TR.	7368 KNOTH PINE AUE. WINTER PARK, FL
4)			_	
5)				
6)			_	
If REMOVING	an office	r and/or director, please list the (itle(s) and	name of the officer/director to be removed:
Title(s)	<u>Name</u>		Title(s)	<u>Namé</u>
1)			4)	
2)			5)	
2\			6)	

E. If amending or adding additional Art (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:	<u>,</u>
(if not applicable, indicate N/A)	,
BRENNAN R PERKINS 80 of 100 SA	ares
TERRY JAMES White, SR 10 of 100 SA	hares
BRENNAN R PERKINS 80 of 100 Sh TERRY JAMES White, SR 10 of 100 Sh TERRY JAMES White, JR 10 of 100 Sh	hare:
The date of each amendment(s) adoption: $11-24-2011$	
Effective date if applicable: //- 24- 20 // (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 amend by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following smust 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 "	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shar action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sharehol action was not required.	lder
Dated //-24-20//	
Signature	
(By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	been er court
BRENNAN R. PERKIN	2
(Typed or printed name of person signing)	,
- PRESI deNt	
(Title of person signing)	