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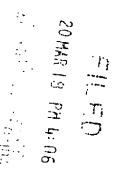
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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPO	RATION: Premiere Builders	Inc	
DOCUMENT NUM	BER: p17000039691		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Shane McGarity		
		Name of Contact Persor	i
	Premiere Builders Inc		
		Firm/ Company	_
	1211 Tech Blvd 123		
		Address	
	Tampa, Fl 33619		
		City/ State and Zip Code	2
	shanemcgarity1@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Shane McGarity		at () 7701233
Name	of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Promiere Buildere Inc

Premiere Builders Inc				
(Name of Corporation	as currently filed with the Flo	rida Dept. of State)		
P17000039691				
(Docume)	nt Number of Corporation (if kn	own)		
Pursuant to the provisions of section 607.1006. Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corp	poration adopts the fo	ollowing amend	Iment(s) to
A. If amending name, enter the new name of the corp	poration:			
			The	new
name must be distinguishable and contain the word "corp" Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	or "Co". A professional corp	rporated" or the abbi poration name must	reviation "Corp contain the w	p.," 'ord
B. Enter new principal office address, if applicable:			 	_
(Principal office address MUST BE A STREET ADDR	<u>(ESS</u>)			_
				<u> </u>
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
			2.4	_
				201
D. If amending the registered agent and/or registere		ter the name of the	7	
new registered agent and/or the new registered of	mce address:			5 ==
Name of New Registered Agent				7
	(Florida street address)			
1000	Trioride Sireet talli essy	151 . 1	76 154	
New Registered Office Address;	(City)	, Florida	(Zip Code)	_
N. D. sissand bounds Circulature if about in Desir	stored troops			
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent.	am familiar with and accept the	obligations of the po.	sition.	
Signat	ure of New Registered Agent, if a	changing		
Check if applicable				

☐ The amendment(s) is/are being tiled pursuant to s. 607.0120 (11) (e). F.S.

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)

____ Add

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: X Change PT John Doe X Remove V Mike Jones

A Remote	<u> -</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Adrien Deverieux	po box 55414 St Petersburg
Add			FI33732
X Remove			
2) Change		<u> </u>	
Add			
Remove Change		_	
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			

Attach additional sheets, if necessary). (Be specific)			
	·		
		-	
	:4.		
		<u> </u>	
	· · · · · · · · · · · · · · · · · · ·	M.H.	
		7.	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,		Co	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	*1	PH	/7
() · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<u></u>	-
	; ; ; =================================		
	,	<u>o</u>	

The date of each amendment(s) a date this document was signed.	doption;	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this to document's effective date on the D	block does not meet the applicable statutory filing requirements, this date wi epartment of State's records.	It not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval	20 HAR
-	(voting group)	00
3-18-2020 Dated	5~ (V	90:1 HU
selecto	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Shane McGarity	
	(Typed or printed name of person signing)	
	MGR	
	(Title of person signing)	