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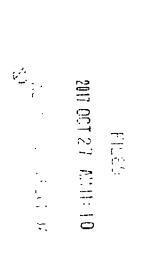
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: JNL CUSTOM BE | JILDERS INC | | |
|---------------------------|--|--|--|--|
| DOCUMENT NUMB | ER: P17000048275 | | | |
| | of Amendment and fee are su | ibmitted for filing. | | |
| Please return all corresp | oondence concerning this ma | itter to the following: | | |
| ı | MANUEL P SANCHEZ | | | |
| - | | Name of Contact Person | n | |
| : | SANCHEZ & PADRON ASSOCIATES INC | | | |
| - | . | Firm/ Company | · · · · · · · · · · · · · · · · · · · | |
| 1 | 953 17 STREET | | | |
| - | Address | | | |
| | VERO BEACH, FL 32960 | | • | |
| - | <u>-</u> | City/ State and Zip Cod | e | |
| PADR | ONMC@HOTMAIL.COM | | | |
| | | sed for future annual report | notification) | |
| | | • | | |
| For further information | concerning this matter, pleas | se call: | | |
| MANUEL P SANCHEZ | | at (| 247-8041 | |
| Name o | f Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | artment of State: | |
| S35 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) | |
| Amer Divis P.O. | ing Address idment Section ion of Corporations Box 6327 hassee, FL 32314 | Amend Divisio Clifton | Address Iment Section on of Corporations Building Executive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FILED

2017 OCT 27 AH 11: 11

JNL CUSTOM BUILDERS INC (Name of Corporation as currently filed with the Florida Dept. of State) 1.1 P17000048275 (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: JNL CUSTOM MISCELLANEOUS SERVICES, INC 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." 870 25TH ST SW B. Enter new principal office address, if applicable: (Principal office address MUST <u>BE A STREET ADDRESS</u>) VERO BEACH, FL 32962 C. Enter new mailing address, if applicable: 870 25TH ST SW (Mailing address MAY BE A POST OFFICE BON) VERO BEACH, FL 32962 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 (Florida street address)

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

New Registered Office Address: _

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

(City)

• 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 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.

| X Change | <u>PT Jo</u> | ohn Doe | | |
|----------------------------|--------------------|---------------------|-------------------------|--|
| X Remove | <u>V</u> <u>N</u> | Mike Jones | | |
| X Add | <u>sv</u> <u>s</u> | Sally Smith | | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s | |
| I) Change | P | LILIANA M GARCIA | 870 25TH STREET SW | |
| Add | | | VERO BEACH, FL 32962 | |
| X Remove | | | | |
| 2) Change | P | JUAN M. NUNO LOMELI | 870 25TH STREET SW | |
| X Add | | | VERO BEACH, FL 32962N/A | |
| Remove | | | | |
| 3) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| | | | | |
| 6) Change | | | . | |
| Add | | | | |
| Remove | | | | |

| E. If amending or adding additional Arti (Attach additional sheets, if necessary). | (Be specific) |
|--|---|
| N/A | |
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| F. If an amendment provides for an exch | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amer | ndment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) N/A | |
| N/A | |
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| The date of each amendment(s) addate this document was signed. | doption: | , if other than the |
|--|--|-------------------------------------|
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this bedocument's effective date on the De | block does not meet the applicable statutory filing requirements, epartment of State's records. | this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were add by the shareholders was/were su | opted by the shareholders. The number of votes east for the amen officient for approval. | dment(s) |
| ☐ The amendment(s) was/were app must be separately provided for | proved by the shareholders through voting groups. The following 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 | |
| hy | (voting group) | |
| | (voting group) | |
| ☐ The amendment(s) was/were add action was not required. | opted by the board of directors without shareholder action and sha | reholder |
| ☐ The amendment(s) was/were add action was not required. | opted by the incorporators without shareholder action and shareho | lder |
| 10/20/2017 | , | |
| Dated | 7 | |
| Signature | la las | |
| (By a d | irector, president or other officer – if directors or officers have no | ot been |
| selecte | d, by an incorporator – if in the hands of a receiver, trustee, or oth | |
| appoin | ted fiduciary by that fiduciary) | |
| | LILIANA S GARCIA | |
| | (Typed or printed name of person signing) | - |
| | PRESIDENT | |

(Title of person signing)