P17000070656

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1/22/1905

COVER LETTER .

TO: Amendment Section Division of Corporations NAME OF CORPORATION: GWB Homes Inc. DOCUMENT NUMBER: P17000070656 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Garry Brookshire Name of Contact Person GWB Homes Inc. Firm/ Company 450 Sun Lakes Rd. Address Melboure, Fl. 32901 City/ State and Zip Code gbrookshire@cfl.rr.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (321) 795-9914

Area Code & Daytime Telephone Number Garry Brookshire Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) 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 to Articles of Incorporation of

. . .

GWB Homes Inc.	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P17000070656	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Meridian Homes Florida, Inc.	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
C. Enter new mailing address, if applicable:	· · · =
(Mailing address MAY BE A POST OFFICE BOX)	N/A
	2
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	
N/A	
Name of New Registered Agent	
(FL -: 1	street address)
N/A	street daarens)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	nt:
I hereby accept the appointment as registered agent. I am familian	
NA	
Signature of New	v Registered Agent, if changing

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change		N/A 	
Add			
Remove			
2) Change			
Add			
Remove			<u> </u>
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u></u>		
Add			
Remove			

If amending or adding additional Artic (Attach additional sheets, if necessary).		
/A		

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If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,	
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
(y 1.00 upp 1.00.00, 1.00.000 0.000)		
'A		
· · · <u>· · · · · · · · · · · · · · · · </u>		
		
		

The date of each a late this document										
Effective date <u>if a</u>	_		AN	NEND	MENT	FILE	PATE Iment file date	1/9,	12019	
			(no i	more thai	n 90 days a _j	fter amen	lment file date	2) / /		
Note: If the date document's effecti	inserted in this ve date on the E	block does Department	s not mee of State's	et the app s records	olicable sta	tutory fili	ng requiremer	nts, this date	will not be	listed as
Adoption of Ame	ndment(s)	(<u>C</u>	CHECK	ONE)						
The amendment by the shareho	it(s) was/were ac lders was/were :	dopted by th sufficient fo	he shareh or approv	olders. T al.	Γhe number	of votes	east for the arr	nendment(s)		
☐ The amendmen must be separe	nt(s) was/were ap ntely provided fo	pproved by or each voti	the share	cholders to entitled	hrough vot to vote sept	ing groups arately on	s. The followi the amendme	ing statemen ent(s):	r i	
"The nun	nber of votes cas	st for the an	nendmen	t(s) was/v	were suffici	ent for ap	proval			
by									2	
		(1	voting gr	оир)	-				تن	•
The amendmen action was not		dopted by th	he board	of directo	ors without	sharehold	er action and	shareholder		
The amendmen action was not	• .	dopted by th	ne incorp	orators w	rithout share	eholder ac	tion and share	cholder	77	;
									7.7	
	1/9/2019 Dated								일	
	Signature	Ban	y B	rochr	hie					
	(By a select	111	, neorporat	or – if in	the hands o		officers have er, trustee, or			
		Garry Bro	ookshire							
		1	(Турес	or printe	ed name of	person sig	ning)			
		President								

(Title of person signing)