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EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FORDS	INCI	
DOCUMENT NUMBER: Po	3 0000 57	133
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
	Name of Contact Perso	
FORDS CUSTO	Firm/ Company	SE SERVICES, INC.
	•	UNITCO
CRYSTAL RIV	IER FL	34429
	City/ State and Zip Cod	е
Fords custom E-mail address: (to be used	2 tampaka I for future annual report	notification)
For further information concerning this matter, please	call:	
HOPACE BOOTH Name of Contact Person	at (_ 35	564-0001
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made page	yable to the Florida Depa	artment of State:
□ \$35 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	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

FORD, INC.	
(Name of Corporation as currently filed with the Fl	lorida Dept. of State)
P0 3 000	0057133
(Document Number of Corporation (if	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
FORDS CUSTOM PLATING	E SERVICES, INC. The new
FORDS CUSTOM PLATING name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable:	6843 MORTH CLTRUS AUB.
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	UNITES
	G843 MORTH CLTRUS AVE. UNIT C-C CRYSTAL RIVER, FL 34428
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addressing new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stree	vet address)
New Registered Office Address: (City)	, Florida
	· • ·
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar was	
Signature of New Registered As	gent, 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)	<u>Title</u>	<u>Name</u>		Address
1) Change Add Remove	. ———	-	<u>. </u>	
2) Change Add Remove		_		
3) Change Add Remove				
4) Change Add Remove		· -		
5) Change Add Remove				
6) Change Add Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
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,			
· · · · · · · · · · · · · · · · · · ·			
F. U.s er	on amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	change, recigsuification, or cancellation of issued shares, sendment if not contained in the amendment itself;	
	·		

The date of each amendment(s) adoption	n: 2-22-12
Effective date if applicable:	2-23-12-
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) at for approval.
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes east for the	e amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were adopted b action was not required.	by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted b action was not required.	by the incorporators without shareholder action and shareholder
<u>. ح</u>	22-12
Signature	ece Root
(By a director selected, by a	r, president or other officer — if directors or officers have not been in incorporator — if in the hands of a receiver, trustee, or other court luciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	PRESIDENT
****	(Title of person signing)