P0200001355

| (Re | equestor's Name) | |
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| (Cit | ry/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
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| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | 8 |
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Amend Cas

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COVER LETTER

| Division of Corporations |
|--|
| NAME OF CORPORATION: Southern & Traditional Homes, Inc. DOCUMENT NUMBER: P6200061355 |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Laura L. Benjanj Name of Contact Person Southern & Traditional Homes Firm/Company P.D. Box 6426 Address Address City/ State and Zip Code [Loeniani @ Lamba bay m. Com E-mail address: (to be used for future annual leport notification) |
| For further information concerning this matter, please call: |
| Laura L. Benighi at (813) 187-3003 Name of Contact Person at (813) 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 Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment Section |

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

| A | rtic | es | ot | Inc | orj | po: | ra | l | l0 | 11 |
|---|------|----|----|-----|-----|-----|----|---|----|----|
|---|------|----|----|-----|-----|-----|----|---|----|----|

| Articles of | incorporation | | |
|--|---|-------------------------|---|
| | of . | . 0 a T | _ |
| Southern & Trad | itional Hi | smes, In | <u>C, </u> |
| (Name of Corporation as curre | | pt. of State) | |
| P02000 | | | |
| (Document Number | r of Corporation (if known) | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation: | nis Florida Profit Corporation | adopts the following am | endment(s) to |
| A. If amending name, enter the new name of the corporation: | | | |
| NA | | | new |
| name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviatio | r "Co". A professional corpo | | |
| B. Enter new principal office address, if applicable: | N/A | | |
| (Principal office address MUST BE A STREET ADDRESS) | | | |
| | | | |
| | | | |
| C. Enter new mailing address, if applicable: | . 1 4 | | |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | NIM | <u> </u> | |
| | | 1977 76 107 TA | |
| | | <u>ား</u> မ | () |
| | | | • |
| D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addr | | ame of the | • |
| Name of New Registered Agent N / A | <u> </u> | | |
| (Florida | street address) | | |
| New Registered Office Address: | | _, Florida_ | |
| | (City) | (Zip Code) | 1 |
| | | | |
| Non-Posta 14 a gray a gray to the second | | | |
| New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia | ent: ar with and accept the obligation | ons of the position. | |
| | , | * • | |

Signature of New 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 | PT Joh | n Doe | |
|-------------------------------|-----------------------|--------------------|---------------------------|
| X Remove | <u>V</u> <u>Mil</u> | ce Jones | |
| X Add | <u>SV</u> <u>Sall</u> | l <u>y Smith</u> | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1)Change | PST | Michael J. Benigni | P.D. Box 6425 |
| Add Remove | | · · | |
| 2) Change Add | PST | Laura L Benigni | P.O. Box 6425 Brainden Fl |
| Remove | | | <u>335</u> 08 |
| 3) Change Add | | | |
| Remove | | | |
| 4) Change Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| 6)Change | | | |
| Add | | | |
| Remove | | | |

| E. | If amo | ending o | r addin | ıg addit | t <mark>ional Ar</mark> ecessary) | ticles, e | nter cha | nge(s) | <u>here</u> : | | | | | | | |
|----|---------|--|---------|-------------|--------------------------------------|-------------|----------------------|---------|---------------|--------------|---------------|---|---|-------------|-----------------|---|
| | (Attacl | r <i>additio</i> | nal she | ets, if ne | ecessary). | . (Be s | specific) | | | | | | | | | |
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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:

(if not applicable, indicate N/A)

NIA

| The date of each amendment(s) adoption: March 3, 2018, if other than the date this document was signed. |
|--|
| Effective date if applicable: (no more than 90 days after amendment file date) |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. |
| Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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" (voting group) |
| The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. |
| Signature March 3, 2018 Signature Marchael J. Bloughe, Faunal Benegre, POA (By a director, president of other officer) if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
| Laura L. Beniani (Typed or printed name of person signing) |
| PST / Laura L. Berigni, POA (Title of person signing) for Michael Berigni |
| Michael J. Benigni Laura L. Benigni, attorney-in-fact |