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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Associated	Craftsmen of A	merica, Inc	
DOCUMENT NUMB				
	of Amendment and fee are su	ibmitted for filing.		
Please return all corresp	oondence concerning this ma	atter to the following:		
•	Nancy Burley			
-		Name of Contact Perso	n	
	Associated Craftsmen of America, Inc			
-		Firm/ Company		
	3625 W Broward	Blvd Suite 200A	\	
-		Address		
	Ft. Lauderdale, F	L 33312		
-		City/ State and Zip Cod	e	
nan	cy@associatedc	raftsmeninc.com	1	
		sed for future annual report		
For further information	concerning this matter, please	se call:		
Nancy Burley		at (954	, 5815081	
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:	
□ \$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		Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation of

Associated Craftsmen of America, Inc			
(Name of Corporation as currently filed with the Flor	ida Dept. of State)		
L36157			
(Document Number of Corporation (if kn	own)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopt	s the following ame	ndment(s) to
A. If amending name, enter the new name of the corporation:			
	MA	Tha	new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.A.	". A professional corporation	ed" or the abbrevi	iation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA		AON Zi
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	17 17 18 18 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	FILED 20 PM
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of		÷
Name of New Registered Agent	NA		
(Florida street c	address)		
New Registered Office Address:	, Florida		
(City)		(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with Signature of New Registered Agent	NA	the position.	
signature oj New Kegisterea Ager	u, y chunging		

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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	Tony Barrier	
Add			
X Remove			
2) Change		_	
Add	•		
Remove			
3) Change		<u> </u>	
Add			
Remove			·
4) Change			
Add	*****		
Remove			
5) Change			
Add			
Remove			
Kemove		*	
6) Change		_	
Add			
Remove			

	(Be specific)
	NA
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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The date of each amendment(s)	adoption: 11/14/2012
Effective date <u>if applicable</u> : 1	0/26/2012
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	sst for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 11/14	I/2012
	Maga & Luzous
selec	director, president or other officer - if directors or officers have not been sted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Nancy Burley
	(Typed or printed name of person signing)
	President
	(Title of person signing)