

P00000007614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



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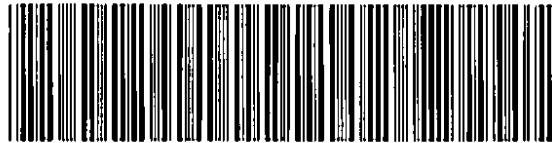
(Business Entity Name)

(Document Number)

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2020 DEC 15 PM 1:34

2020 DEC 18 AM 8:05

STILL KEPT
DEC 21 2020

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PA DEGENNARO'S, INC.

DOCUMENT NUMBER: P 00000007614

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KELLY S. JASON, ESQ.

Name of Contact Person

ARDITO LAW GROUP, P.C.

Firm/ Company

25 MID-TECH DRIVE, SUITE 25

Address

WEST YARMOUTH, MA 02673

City/ State and Zip Code

KJASON@CAPECODLAWYERS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KELLY S. JASON, ESQ.

at (508)

775-3433 Ext. 248

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

PA Degemaro's, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P00000007614

(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:

The new 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."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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 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 Office Address:

(City)

Florida

(Zip Code)

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

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

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☐ Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|--|-------|--------------------|--|
| 1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | T | GAIL CAMPANELLI | 198 SOUTH STREET S. YARMOUTH, MA 02664 |
| 2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | D | NATALIE FERNSEBNER | 7 DAVEY LANE WINCHESTER, MA 01890 |
| 3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | STD | MICHAEL B. STUSSE | 202 SOUTH STREET S. YARMOUTH, MA 02664 |
| 4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | PD | ANGELO GRASSO | 270 PINE AVENUE Lauderdale by the Sea, FL 33308 |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

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)

N/A

November 9, 2020

The date of each amendment(s) adoption: _____, 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 incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ 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)

Dated DEC. 8, 2020

Signature Angelo Grasso
(By a director, president or 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)

ANGELO GRASSO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**CORPORATE VOTE
PA DEGENNARO'S, INC.**

At a meeting of the Board of Directors of White Cap of Florida, Inc. (the "Corporation"), held on November 9, 2020, notice of such meeting having been waived, it was:

VOTED UNANIMOUSLY:

RESOLVED/VOTED: that Gail S. Campanelli is removed as Treasurer of the Corporation and that Michael B. Stusse is appointed Treasurer in her place; and,

RESOLVED/VOTED: that Natalie Fernsebner is removed as a Director of the Corporation and Angelo Grasso is appointed Director in her place; and,

RESOLVED/VOTED: that the President and/or Secretary of the Corporation be, and are hereby authorized, directed, and empowered, I the name and on behalf of the Corporation to amend the records of the Corporation and file such amendments as may be required by the State of Florida and to affix the seal of the Corporation thereto.

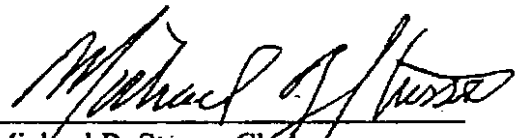
There being no further business at hand, it was

VOTED UNANIMOUSLY:

To Adjourn.

A true copy:

ATTEST:
(seal)



Michael B. Stusse, Clerk
Clerk of the Corporation

COMMONWEALTH OF MASSACHUSETTS

County of

On this the 9 day of Nov., 2019, before me, the undersigned notary public, personally appeared Michael B. Stusse, being personally known to me to be the person who signed the preceding document and acknowledged and acknowledged to me that he signed it voluntarily for its stated purpose as Secretary of Pa Degennaro's, Inc. clerk of White Cap of Florida, Inc.

Kelly S. Jason
Notary Public.
My Commission Expires: 2/19/2021



KELLY S. JASON
NOTARY PUBLIC
Commonwealth of Massachusetts
My Commission Expires
February 19, 2021