## P00000049477

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18.8

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

DOCUMENT NUMBER: Poocooo 49477  The enclosed Articles of Amendment and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:
Please return all correspondence concerning this matter to the following:
Thomas Decleene
(Name of Contact Person)
All Chaftenen Enjet Asses Inc (Firm/Company)
(Firm/ Company)
1532 Land o Lates Blvd Suffe H
(Address)
LUTZ FL 335-49
(City/ State and Zip Code)
For further information concerning this matter, please call:
Thomas De Cleene at (813) 996-4777
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee Scrifficate of Status
Mailing Address Street Address
Amendment Section Amendment Section  Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

## Articles of Amendment to Articles of Incorporation

FILED

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01 200 KOO -4 PM
All Chaftsmen Enjerthies Inc. SECRETARY OF S (Name of corporation as currently filed with the Florida Dept. of State)
(Name of corporation as currently filed with the Florida Dept. of State)
P00000049477
(Document number of corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> dopts the following amendment(s) to its Articles of Incorporation:
IEW CORPORATE NAME (if changing):
Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
MENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) nd/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Please See Attacked
fleose See Attached for all changes
(Attach additional pages if necessary)
f an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions or implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

All Craftsmen Enterprises Inc.

P00000049477

Amendments Adopted

Remove

Title: PCEO Name: Eric Gaul

Address: 14027 Club house Circle #2706 Tampa FL 33618

Remove

Title: FRO

Name: Eric Gaul

Address: 14027 Club house Circle #2706 Tampa FL 33618

Add

Title: PCEO

Name: Thomas DeCleene

Address: 1532 Land O Laked Blve Suite H Lutz FL 33549

Change in registered agent

New Agent

Name: Thomas DeCleene

Address: 1532 Land O Laked Blve Suite H Lutz FL 33549

I understand and accept the position and responsibilites of registered agent for

All Craftsmen Enterprises Inc.

Thomas DeCleene

SECRETARY OF STATE

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The date of each amendment(s) adoption: 7/22/08
Effective date if applicable: 7/22/08
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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  (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)
Thomas Packers.
Thomas Re Cleere (Typed or printed name of person signing)
Vice President  (Title of person signing)  Full Edition
(Title of person signing)
(Title of person signing)  SECRETARY OF STATE FILING FEE: \$35