## P00000073491

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(Requ	uestor's Name)	
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(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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## COVER LETTER

TO: Amendment Section **Division of Corporations** 

NAME OF CORPO	ORATION: Kent Bros., Inc.			
	IBER: P00000073491			
	s of Amendment and fee are su	ibmitted for filing	,	
Please return all corr	espondence concerning this ma	tter to the followi	ng:	
	Ron Kent			
		Name of Cont	act Persor	1
	Kent Bros., Inc.			
		Firm/ Cor	ทอแบง	
	PO Box 328		. ,	
	•	Addre	:SS	
	Elkton, FL 32033			
		City/ State and	Zip Code	)
rker	t@kb-usa.com			
	E-mail address: (to be u	sed for future ann	ual report	notification)
For further informati	on concerning this matter, pleas	se call:		
Ron Kent		90 at (	)4	de & Daytime Telephone Number
Name	of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Flo	orida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Cop (Additional c enclosed)	py	□S52.50 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 ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed Kent Bros., Inc.)  Possible 73491  (Document Number of Corporation: Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:	oration (if known)	ndment(s) to
(Document Number of Corp.) Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florid</i> its Articles of Incorporation:		ndment(s) to
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florid</i> its Articles of Incorporation:		ndment(s) to
its Articles of Incorporation:	la Profit Corporation adopts the following amen	ndment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". word "chartered," "professional association," or the abbreviation "P.A.	company," or "incorporated" or the abbrevic A professional corporation name must contain	new ation n the
B. Enter new principal office address, if applicable:	14 Reid Street	
(Bulletter J. C January WHICT BE & CTREET AND DECC)	latka, FL 32178	
		<u> 현</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	,	
		- <del>[:</del>   2
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the	
Name of New Registered Agent  Ronald Kent		
1625 County Road 13		
(Florida street ad	dress)	
New Registered Office Address:	Florida 32033	
(City)	(Zip Code)	_

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: <u>X</u> 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	VP	Matthew Kent	1110 C Wo	odlawn Road
X Add			St. Augusti	ne, FL 32084
Remove				
2) Change				
Add				<del></del>
Remove				
3 ) Change				<u> </u>
Add				
Remove			<del></del>	
4) Change				
Add				
Remove			<del></del>	
5) Change			·	
Add				
Remove				
0 69				
6) Change			******	
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	10.7 <u>A</u>
-	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares.
if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

	09/01/17	
The date of each amendment		, if other than the
date this document was signed		
Decoration data to annull add a	09/01/17	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(in more than see days after unicomplete date)	
	this block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	I not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/web by the shareholders was/web	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
, <u></u>	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	09/01/17	
Signature		
	By a director, president or other officer – if directors or officers have not been	_
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	opointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Prosident	
	(Title of person signing)	