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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: The Tools Man, In	c	
DOCUMENT NUMI	P00000107744		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Trina Gonzalez		
		Name of Contact Person	1
	The Tools Man, Inc.		
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
	5500 SW 48th ST, Suite B		
		Address	
	Davie, FL 33314		
		City/ State and Zip Cod	e
For further information	E-mail address: (to be used)		notification)
Rafael Gonzalez		at (954	
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or 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)
	iling Address		Address
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.C	P.O. Box 6327 Clifton Building		Building
Tallahassee, FL 32314 2661 Executive		Executive Center Circle	

Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

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The Tools Man, Inc.	· · · · · · · · · · · · · · · · · · ·
(Name of Corporation as	currently filed with the Florida Dept. of State)
P00000107744	
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:
	The new
name must be distinguishable and contain the word "c "Corp.," "Inc" or Co.," or the designation "Corp," "I word "chartered." "professional association," or the abbr	orporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u></u>
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent and/or registered o new registered agent and/or the new registered office	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
new registered agent and/or the new registered offic  Name of New Registered Agent	(Florida street address) , Florida
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	red Agent: I familiar with and accept the obligations of the position.
Signature	e 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	<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>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
<i>5</i> . Ol			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

he Tools Man, Inc. is amend	ling the Articles of Incorporation	regarding the number of aut	horized shares and the
r Value of its stock. The ch	nange is to retract the outstanding	3 1000 shares common stock	at \$10.00 Par Value and
thorize 100 shares of comm	non stock at \$1.00 Par Value effe	ctive May 1, 2017.	
, , , , , , , , , , , , , , , , , , ,			
			· · · · · · · · · · · · · · · · · · ·
	<del></del>		
			<del></del>
If an amendment provide	es for an exchange, reclassifica	tion, or cancellation of issu	ed shares.
provisions for implemen	iting the amendment if not con	tained in the amendment it	self:
(if not applicable, incee above	Aicale N/A)		
ee above			

	05/01/2017	
	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	5/01/2017	
briefite date <u>it apprendie</u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date wi Department of State's records.	ll not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ 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	ast for the amendment(s) was/were sufficient for approva!	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
05/01/20 Dated	017	
Signature	O Los	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Rafael Gonzalez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	