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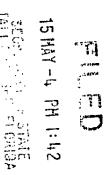
| (Requestor's Name) | |
|---|---|
| (Address) | 2 |
| (Address) | _ |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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COVER LETTER

| TO: Amendment Sec Division of Corp | porations | | |
|---------------------------------------|---|--|--|
| NAME OF CORPO | PRATION: A.F.A.B. Contracto | ors, Inc. | 11 (1) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4 |
| DOCUMENT NUM | BER: P01000002571 | | |
| | s of Amendment and fee are sul | omitted for filing. | ************************************** |
| Please return all corr | espondence concerning this mat | ter to the following: | |
| | Samuel B. Taylor | | |
| | | Name of Contact Person | l |
| | Samuel B. Taylor, P.A. | | |
| | | Firm/ Company | |
| | P.O. Box 1474 | | |
| | , | Address | |
| | Destin, FL 32540 | | |
| | | City/ State and Zip Code | • |
| sam | @staylorpa.com | | |
| | E-mail address: (to be us | ed for future annual report | notification) |
| For further informati | on concerning this matter, pleas | e call: | |
| Samuel B. Taylor | | at (<u>850</u> | de & Daytime Telephone Number |
| Name | e of 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) |
| M | ailing Address | Street | Address |
| | mendment Section | | lment Section |
| Division of Corporations | | | on of Corporations |
| | O. Box 6327 Illahassee, FL 32314 | | Building Executive Center Circle |
| 13 | manassee, FL 32314 | 2001 8 | ACCULIVE CEINEL CITCLE |

Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation of

| A.F.A.B. Contractors, INC. | 三声 艺 |
|---|---------------------------------------|
| (Name of Corporation as currently filed with the Florida Dept. of State) | |
| PAIDADO 02571 | · · · · · · · · · · · · · · · · · · · |
| (Document Number of Corporation (if known) | |
| ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the s Articles of Incorporation: | e following amend |
| If amending name, enter the new name of the corporation: | 22 711, |
| me must be distinguishable and contain the word "corporation," "company," or "incorporated" | The n |
| Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the | <u>e</u> |
| new registered agent and/or the new registered office address: | _ |
| Name of New Registered Agent | |
| (Florida street address) | |
| (1 to tau street unuress) | |
| New Registered Office Address: , Florida (City) (Zip. | Code) |
| ew Registered Agent's Signature, if changing Registered Agent: thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the | ŕ |
| Signature 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.

| X Change | PT | John Doe | |
|-------------------------------|--------------|----------------|------------------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | PST | Gary L. Mason | 471 Goodwin Creek Road |
| Add | | | Freeport, FL 32439 |
| X Remove | | | |
| 2) Change | PST | Julie S. Mason | 471 Goodwin Creek Road |
| X Add | | | Freeport, FL 32439 |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | <u> </u> | | |
| Remove | | | |

| | sheets, if necessary). (Be sp | pecific) | | |
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| f an amendmen | provides for an exchange. | reclassification, or ca | ncellation of issued sl | ares. |
| cifnot appli | nplementing the amendmen able, indicate N/A) | t if not contained in 1 | <u>he amendment itself:</u> | |
| (ij noi uppin | uvie, maietile 1971) | | | |
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| 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 document's effective date on the Department of State's records. | not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ■ 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) | |
| (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. | |
| Dated April 30. 30.15 | |
| Signature Muser | _ |
| (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) | |
| Julie S. Mason | |
| (Typed or printed name of person signing) | |
| PST | |
| (Title of person signing) | |