## POIDDODSwil

, **h** 





800244609928

02/22/13--01023--025 \*\*52.50

13 FCR 22 PH &: 31

Amendices 10 2/24/13

## COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: No Limit C	arpentry, Inc.			
P010000366	1			
DOCUMENT NUMBER: P010000366				
The enclosed Articles of Amendment and fee are st	abmitted for fiting.			
Please return all correspondence concerning this ma	alter to the following:			
Courtenay Bress	ette			
	Name of Contact Person			
No Limit Carpent	ry, Inc.			
	Firm/ Company			
PO Box <u>3</u> 337				
****	Address			
North Fort Myers	, FL 33918			
	City/ State and Zip Code			
braintreehick@yahoo	n com			
	sed for future annual report notification)			
<b></b>	• • • •			
For further information concerning this matter, please call:				
Courtenay Bressette	Area Code & Dayrime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made	payable to the Florida-Dopartment of State:			
S35 Filing Fee DS43 75 Filing Fee & Cortificate of Status	Certified Copy (Additional copy is enclosed)    \$52.50 Filling Fee & Certificate of Status			
Mailing Address	Street-Address			
Amendment Section	Amendment Section			
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
	Tallahassec, FL 32301			

## Articles of Amendment to 13 $\mathcal{F}_{\widehat{\mathcal{E}}\widehat{\mathcal{B}}}$ Articles of Incorporation of



No Limit Carpentry, Inc.				
(Name of Corporation as	currently filed with the F	lorida Dept. of State)		
P01000003661				
(Docume	nt Number of Corporation (i	r known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this a	Floridu Profit Corporation adopts the following an	nendmeni(s) to	
A. If amending name, enter the new n	ame of the corporation:			
			е печ	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "	n," "company," or "incorporated" or the abbre Co". A professional corporation name must cont P.A."	iviation tain the	
B. Enter new principal office address, if applicable:		2481 Gail Helen Court		
(Principal office address MUST BE A S	TREET ADDRESS)	North Fort Myers, FL 33917		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	<u>icable:</u> OFFICE BOX)	PO Box 3337		
	<del></del>	North Fort Myers, FL 33918		
D. If amending the registered agent at new registered agent and/or the ne	<u>rd/or revistered office address</u> w revistered office address	ress in Florida, enter the name of the		
Name of New Registered Agent	Courtenay Bress			
2481 Gail Hel		n Court		
	(Florida str	eet uddress)		
New Registered Office Address:	North Fort Myer	s, Florida 33917		
	(City)	(Zip Code)		
New Registered Agent's Signature, if a	hanging Registered Agent	<u>.                                    </u>		
I hereby accept the appointment as regis	ivred agent. Van familidr	with and accept the obligations of the position.		
Si	engine 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> </u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check Onc)	Title	<u>Name</u>		Address
1) Change	V	Bernadette Bressette		1340 Laurel Drive
Add				North Fort Myers, FL 33917
X				
2) Change	S	Heidi	Andress	PO Box 3337
X Add				North Fort Myers, FL 33918
Remove				
3 ) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				<del></del>
Add				
Remove				
6) Change				
Add				
Remové				
Kemove				

stach additional	ding additional Articles, enter change(s) here: theets, if necessary). (Be specific)
<u> </u>	
provisions for in	provides for an exchange, reclassification, or cancellation of issued shares, plementing the amendment if not contained in the amendment itself; table, indicate N/A)
	110
	<del></del>

2/20/13
The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east 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
Dated Signature  Signature
(By a director, president of 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)
Courtenay Bressette
(Typed or printed name of person signing)
President
(Title of person signing)