## POI 0000084531

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SECRETARY OF STATE
TALLAHASSEE, FL

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION:	D. W. Builders, Inc.		
	OCUMENT NUMBER: P01000054531			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
		Walid Abusad		
	Name of Contact Person		<del></del>	
	Firm/ Company			_
6350 S. W. 134th Drive				
Address			<del></del>	
	Miami, Florida 33156			<b>ب</b>
	City/ State and Zip Code			
		walid@dwhomeworks.co	om	NOV NOV
	E-mail address: (to be u	sed for future annual report	notification)	3
For further information	n concerning this matter, plea	se call:		2024 NOV 13 AM 8: 03 SECRETARY OF SPITE
w	alid Abusad	786	350-2528	THE CS
Name o	of Contact Person	Area Co	de & Daytime Telephone Nun	nber
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ling Address		Address	

Amendment Section

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

D. W. Builders, Inc.

	· · · · · · · - · · · · · · · · · ·	
(Name of Cor	poration as currently filed with the Florida Dept. of	<u>Ŝtate</u> )
	P01000054531	
(	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new name o	f the corporation:	
	D W Homeworks, Inc.	
	ord "corporation," "company," or "incorporated" or th "Inc," or "Co". A professional corporation name e abbreviation "P.A."	
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
		<del></del>
C. Enter new mailing address, if applicable		
(Mailing address <u>MAY BE A POST OFFI</u>	CE BOX)	<del></del>
		<u> </u>
D. If amending the registered agent and/or new registered agent and/or the new regi	registered office address in Florida, enter the name of	the TORREST
	secret office address.	温泉 3
Name of New Registered Agent		
	(Florida street address)	- O O
New Registered Office Address:		rida S
New Negasterea Office Adaress.	(City)	(Zip Code)
New Desirement Ament's Simple 16 - barries	- Dodge od A	
New Registered Agent's Signature, if changing the large the appointment as registered a	ng Registered Agent: igent. I am familiar with and accept the obligations of t	he position.
	Signature of New Registered Agent, if changing	
	G y G	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
i) Change			
Add			
Remove			<del></del>
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		<del></del>	AT-T-F-100-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Add			2014 NO SECRE
Remove			
5) Change			
Add			
Remove			ကျမှ တွေ မော်
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)		
······································			
		_ · · · · · · ·	
		,	
<del> </del>			
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and and it is indicated in the amendment itself:		
(if not applicable, indicate N/A)	numera if not contained in the amendment user:		
(y not applicable, material)			
(g not applicable, material)			<del></del>
(g not applicance, maleute mil)		—— <del>(</del> }—	)2:
(g not applicance, marcule 1111)		SECRE TALL	)Z4 <b>H</b> O
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(y not apprecante, marcate min)		SECRETARY TALLAHAS	)Z4 NOV   3
(y not appreciate, marcute min)		SECRETARY DI TALLAHASSE	124 NOV   3   R.M
(y not applicable, marcule 1111)		SECRETARY DE SI	124 HOV 3 KM 8:
(y not appreciate, marcure min)		SECRETARY DE STATE	024 NOV 3 RM 8: 03

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:	<del></del>
(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 incorporators, or board of directors without shareholder action and s action was not required.	hareholder
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 <sup>,,,</sup>	
(voting group)	
DatedNovember 6, 2024	
Signature	_
(By a difector, 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)	
Walid F. Abusad	
(Typed or printed name of person signing)	Jaze Jaze
President	TARE NO.
(Title of person signing)	TARY OF STATE
	93 PE