Jun 20 05 02:16p/ Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 205-0380

From:

Account Name : CHECKMATE

Account Number : 120030000146

Phone : (941)922-2801

Fax Number : (941)922-7741

BASIC AMENDMENT

HURRICANE FRAMERS, INC.

Certificate of Status	0
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Page Count	01
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF COR	PORATION: HURRICANE	FRAMERS, INC.	
DOCUMENT N	UMBER: P03000015779		
The enclosed Arti	cles of Amendment and fee:	are submitted for filing.	
Please return all c	orrespondence concerning th	is matter to the following:	
	LE	EAH HARN	
	(Name	of Contact Person)	
	c	HECK MATE	
	(Fi	ma/Company)	
	4411 BEE	RIDGE ROAD #257	
		(Address)	<u> </u>
	SARA	SOTA, FL 34233	
	(City/ S	tate/ and Zip Code)	
For further inform	ation concerning this matter,	please call:	
t.1	EAH HARN	at (941) 922-280	1
(Nam	e of Contact Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a chec	k for the following amount:		
2 \$35 Filing For	☐ \$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)
An Div	uiting Address endment Section ision of Corporations Box 6327	Street Address Amendment Sect Division of Corpo 409 E. Gaines Str	orations

Tallahassee, FL 32399

FILED

05 JUN 20 AM 9: 37

Articles of Amendment to

of	ALLAHASSEE. FL
HURRICANE FRAMERS, INC.	
(Name of corporation as currently filed with the Florida Dept. of State)	
P03000015779	
(Document number of corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit adopts the following amendment(s) to its Articles of Incorporation;	il Corporation
NEW CORPORATE NAME (if changing):	

<u>NEW</u> (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) ADD OFFICER: FRANCES J. MARCOCCI, SECRETARY 2968 INDIAN RIVER DRIVE, NE PALM BAY, FL 32905 (Attach additional pages if necessary) If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) RECLASSIFICATION OF SHARES TO REFLECT 10% OWNERSHIP TO FRANCES J. MARCOCCI

(continued)

The date of each amendment(s) adoption: MAY 12, 2005
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
2 The amendment(s) was/were approved by the shareholders. The number of votes cast fo 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 an shareholder action was not required.
Signed this
Signature KUSOR Mathila Lila
(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)
KARL K. MATHESIUS
(Typed or printed name of person signing)
DIRECTOR
(Title of person signing)

FILING FEE: \$35