## P03000041659

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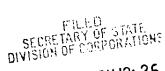
C/1,30/15

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	RATION: Old Naples BER: P0300004165		
	of Amendment and fee are sub		
Please return all corre	spondence concerning this mat	ter to the following:	
	Zach Mock		_
		Name of Contact Person	
	Old Naples Builde	ers, Inc.	
		Firm/ Company	
	382 Broad Ave S		
		Address	
	Naples, FL 34102	2	
		City/ State and Zip Code	
mo	ck40@hotmail.com	m	
		ed for future annual report	notification)
For further information	on concerning this matter, pleas	e call:	
Rita Pruitt		at (239	, 435-1909
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	iling Address endment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle issee, FL 32301

## Articles of Amendment to Articles of Incorporation of



15 JAN 28 PM 12: 36

Old Naples Builders, Inc.	
(Name of Corporation as currently filed with the Flo P03000041659	rida Dept. of State)
(Document Number of Corporation (if k	(nown)
•	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatistical Articles</i> of Incorporation:	dorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
, ,	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Futor new melling address if applicables	N1/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office address	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent N/A	
•	
(Florida stree	et address)
New Registered Office Address:	. Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and account the obligations of the position
1 негеоу ассерт те арропитет из registerea agent. 1 am jamutar wi	т ана ассері іне оондановы ој те ромнов.
Signature of New Registered Ag	rout if changing
Signature of New Registerea Ag	war, y chunging

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	Р	Kerry P. Masters	382 Broad Ave S
Add			Naples, FL 34102
Remove		-	
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Characa			
6) Change			
Add			
Remove			

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If an ar	mendment pro	ovides for an e	exchange, recla	<u>ssification, or c</u>	ancellation of is the amendment	sued shares,	
provis (i)	f not applicabl	e, indicate N/A	)	ot contained in	the amendment	itseii.	
/A		•,	,				
						<u></u>	
			, and				

The date of each amendment(s) adoption:

January 1, 2015

SECRETARY OF STATION:

DIVISION OF CORPORATION:

If other than the date this document was signed.

Life JAN 28 PM 12: 37

In omore 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 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

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.

(voting group)

Dated 01/23/15

Signature

(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 count appointed fiduciary by that fiduciary)

Zach Mock

(Typed or printed name of person signing)

VP

(Title of person signing)