

PD3000062303

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04 MAR 18 AM 11:31  
TALLAHASSEE, FLORIDA

Angela  
MAD 3/24

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Articles of Amendment Changes

**DOCUMENT NUMBER:** P03000062303

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ED MCGLYNN  
(Name of Person)

PREFAB TRUSSES - HOMES - COMMERCIAL BUILDINGS INC.  
(Name of Firm/ Company)

6091 DELLWOOD TERRACE  
(Address)

LABELLE, FLORIDA 33935  
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

ED MCGLYNN at ( 863 ) 675-8822  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|--|--|---|---|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

Articles of Amendment  
to  
Articles of Incorporation  
of

PREFAB TRUSSES - HOMES - COMMERCIAL BUILDINGS INC.

(Name of corporation as currently filed with the Florida Dept. of State)

P03000062303

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**NEW CORPORATE NAME (if changing):**

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

I DAVID WELCH SR. (REGISTERED AGENT / PD WISH TO AMEND THE FOLLOWING CHANGES.

ARTICLE V:

1. STEVE MAGNER, PRESIDENT Address: 6091 Dellwood Terrace, Labelle, FL. 33935

2. ED McGLYNN, CFO Address: 6091 Dellwood Terrace, Labelle, FL. 33935

3. DAVID WELCH SR., VP Address: 6091 Dellwood Terrace, Labelle, FL. 33935

ARTICLE 11:

ADDRESS CHANGE: New Address is: 6091 Dellwood Terrace

LaBelle, FL. 33935

(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)

(continued)

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TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: 3/15/04

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were approved 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)

- ☐ 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.

Signed this 15th day of MARCH, 2004.

Signature David Welch Sr.  
(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)

DAVID WELCH SR.  
(Typed or printed name of person signing)

REGISTERED AGENT / PD  
(Title of person signing)

**FILING FEE: \$35**