# P03000106473

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SECRETARY OF STATE SECRETARY OF STATE SECRETARY OF STATE SEC. FLORID.

WOR 11/30/11

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: OTTER CREEK D	DRYWALL, INC
DOCUMENT NUMBER: P03000106473	
The enclosed Articles of Amendment and fee are su	bmitted for filing,
Please return all correspondence concerning this ma	tter to the following:
ULLI STEINER-MASSEY	
Na	ame of Contact Person
TAX PROFESSIONALS, LLC	Firm/ Company
PO BOX 760	
10 BOX 700	Address
GENEVA, AL.36340	
Cit	ty/ State and Zip Code
ULLI@MCQUAIDTAX.COM E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, pleas	se call:
ULLI STEINER-MASSEY	at ( 334 ) 684-6398
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
☑ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

### FILED

2011 NOV 28 PM 3 00

OTTER CREEK DRYWALL INC		SE	CRETARY OF STATE
(Name of Corporation as currently filed w	vith the Florida	Dept. of State)	CAMASSEE.FLORID/
P03000106473			•
(Document Number of Corp	ooration (if know	wn)	•
Pursuant to the provisions of section 607.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this F	lorida Profit Corpor	ration adopts the following
A. If amending name, enter the new name of the corpor	ration:		
The new name must be distinguishable and contain the wor abbreviation "Corp.," "Inc.," or Co.," or the designation name must contain the word "chartered," "professional as.	n "Corp," "Inc	," or "Co". A prof	essional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u></u>		
	<del></del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
	_		
D. If amending the registered agent and/or registered o new registered agent and/or the new registered office		ı Florida, enter the i	name of the
Name of New Registered Agent:			<u> </u>
·			
(1	Florida street ada	lress)	<del></del>
New Registered Office Address:		, Flori	da
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	<mark>ed Agent:</mark> familiar with a	nd accept the obligat	ions of the position.
Signature of New Re	egistered Agent,	if changing	

## If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director. (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an

additional sheet.)

Title(s)		<u>Name</u>	,	Address
1) <u>P</u>	<u>. v</u>	WALTER R PHILLIPS		1524 JACK JOHNSON LANE PONCE DE LEON, FL. 32455
2) <u>VP</u>	<u>C</u>	COLTEN Y MANNING		1524 JACK JOHNSON LANE PONCE DE LEON, FL. 32455
3) <u>T</u>	<u>R</u>	ROBERT L WINTERS		1524 JACK JOHNSON LANE PONCE DE LEON, FL. 32455
4)	_		,	
5)			- -	
6)	_			
If REMOVING	an officer i	and/or director, please list the ti	tle(s) and	name of the officer/director to be removed:
Title(s)	<u>Name</u>		Title(s)	<u>Name</u>
1)			4)	
2)			5)	
2)			0	

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
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	<u> </u>

F. If an amendment provides for an 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)
<u> </u>
The date of each amendment(s) adoption: 11-14-11
Effective date if applicables
Effective date if applicable:  (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
(SIZSIZE)
☐ 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 ."
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.
Dated NOVEMBER 14, 2011
Signature W. Phillips
(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)
WALTER R PHILLIPS
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)