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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: GLENN NORWO	OD CONSTRUCTION, IN	C		
DOCUMENT NUMI					
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	itter to the following:			
	GLENN NORWOOD				
	Name of Contact Person				
		Firm/ Company			
	POST OFFICE BOX 2729				
	Address				
	BELLEVIEW, FL 34421				
	City/ State and Zip Code				
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
		at (	) de & Daytime Telephone Number		
Nume o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
S35 Filling 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)		
Mailing Address			Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clitton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## FILED 17 NOV -9 PM 4: 04

constitute of SMIS

(Name of Corporation as current	ly filed with the Florida Dept of State)
GLENN NORWOOD CONSTRUCTION, INC	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
( NOT APPLICABLE )	The new
name must be distinguishable and contain the word "corporatio "Corp" "Inc.," or Co.," or the designation "Corp." "Inc." or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Mining times) MAT BE AT ONLY OF THEE DOOR	
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered of fice addres	<u>s:</u>
Name of New Registered Agent	<u> </u>
(Florida st	reet address)
New Registered Office Address:	
	(City) (Zip Code)
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New .	Registered Agent, if changing

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: <u>X</u> Change	<u>PT</u>	John De	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	ST	_	SHERREL NORWOOD	POST OFFICE BOX 2729
XAdd				BELLEVIEW, FL 34421
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4)Change		<del>-</del>		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach additional sheets, if necessary).	icles, enter changets (Be specific)			
( NOT APPLICABLE )				
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		<del>.</del>		
	-			
If an amendment provides for an excl	nange, reclassificatio	on, or cancellation	of issued shares.	
provisions for implementing the amo	endment if not conta	ingd in the amend	ment itself:	
(if not applicable, indicate N/A)				
( NOT APPLICABLE )			_ <del></del>	
· ·				
	<u> </u>			
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·				

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	tho more than 90 days after amenament five date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
'by	<u> </u>	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
06/13/201	7	
Dated		
Signature	X Shalled	
(By a c	lirector, president of the free - if directors or officers have not been	<del></del>
selecte	ed, by an incorporator – if in the hands of a receiver, trustee, or other court intended fiduciary by that fiduciary)	
	GLENN NORWOOD	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del>_</del>