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## **COVER LETTER**

• TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:Consta,	Trim And Carl	binets Incorpted
DOCUMENT NUMB	ER:	<del> </del>	
The enclosed Articles of	f Amendment and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this mat	tter to the following:	
· -		City/ State and Zip Code	Fnc.  327  ad Cabinst. Com  notification)
For further information	concerning this matter, pleas	se call:	
		at (	de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$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)
Ame Divis P.O.	ing Address Indment Section Island of Corporations Box 6327 Islandsec, FL 32314	Ameno Divisio Ctifton	Address dment Section on of Corporations a Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

	Articles of Incorpo	ration	JUN ET
	of	. 1	1 25 M
Compar Trim and	planeto FI	Korporalle	JUN 25 PM 2:
(Name of Corporation as curre	ently filed with the Florid	a Dept. of State)	759 A
Pasana	1132674		FLONE
(Document Num	nber of Corporation (if kno	wn)	- DA
`	•	,	
tursuant to the provisions of section 607.1006, s Articles of Incorporation:	Florida Statutes, this <i>Flori</i>	da Profit Corporation ad	opts the following amendment(
. If amending name, enter the new name of	f the corporation:		
			The new
ame must be distinguishable and contain to	he word "corporation."	"company." or "incorpo	
Corp.," "Inc.," or Co.," or the designation or "chartered," "professional association,"	"Corp," "Inc," or "Co".	A professional corpora	
B. Enter new principal office address, if app	alicable:		
Principal office address <u>MUST BE A STREE</u>			
,			
	<del></del>		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable			
(Mailing address <u>MAY BE A POST OFFI</u>	<u>CE BOX</u> )		
	~		
		•	
). If amending the registered agent and/or a	registered office address i	in Florid <u>a,</u> enter <u>the n</u> aπ	ne of the
new registered agent and/or the new regi			
Name of New Registered Agent			
Name of New Registeren Agent	<del></del>		
	(Florida street al	ddress)	
New Registered Office Address:		, Florida_	
	(City)		(Zip Code)
•			
New Registered Agent's Signature, if chang			
hereby accept the appointment as registered	agent. I am familiar with	and accept the obligation.	s of the position.
	•		
Signatu	ire of New Registered Agen	t, 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> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l)Change Add Remove	Secretary	Jushua Homan	8) Boy Pine DR CROWNERSKIN FT.
2)Change Add Remove	Victorilat	- Scott Honan II	87 Boylow DR. CRAWING VIII- F1 32-32-7
3)ChangeAddRemove	<del></del>		
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

ttach additional sheets, if necessary). (Be sp					
			<u> </u>		
				F	
an amendment provides for an exchange, r	eclassificati	on oregne	rellation of i	sened shares	c
rovisions for implementing the amendment	if not conta	ained in the	e amendmer	ıt itself:	24
(if not applicable, indicate N/A)					
·			<del></del>		
			<del></del>		<u></u>
·					
			·	·	

The date of each amendment(s) ac	doption: 6-25-12
Effective date if applicable:	6-75-12 (no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.
	proved by the shareholders through voting groups. The following statement 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)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
DatedSignature	irector, president or other officer – if directors or officers have not been
selected	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	Scott Homps (Typed or printed name of person signing)
	, <u> </u>
	Vres dent (Title of persón signing)
	(Title of person signing)