P03000/39672

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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SECRETARY OF STATE SHAPE AHASSEE, FLORED

Amend

OCT 1 7 2012

T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: JONES CA	ARPENTRY, INC	;
DOCUMENT NUMBER: P0300013967	72	
The enclosed Articles of Amendment and fee are su		
Please return all correspondence concerning this ma	atter to the following:	
JAMES J O'HEA	RN	
	Name of Contact Person	1
JAMES J O'HEA	RN, ACCOUNTA	ANT
	Firm/ Company	
2466 NE 17TH C	OURT	
	Address	
JENSEN BEACH	1, FL 34957	
	City/ State and Zip Code	e
OHERNTAX@BELL	SOUTH NET	
——————————————————————————————————————	sed for future annual report	notification)
· ·	•	,
For further information concerning this matter, plea	se call:	
JAMES J O'HEARN	at (_772	, 225-1136
Name of Contact Person		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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street	Address
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327		on of Corporations Building
Tallahassee, FL 32314		Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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

FILED
2007 16 PH 12:55

JONES CARPENTRY, INC.

(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:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

N/A

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)	N/A

D. If amending the registered agent and/or registered office address 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 street address)		
New Registered Office Address:	N/A		, Florida	
		(City)		(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I 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: X Change	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	mith_	
Type of Action (Check One)	<u>Title</u>		Name	Address .
1) Change	D	_	THOMAS TURNAGE	1025 SW PLACETAS DR
X_{Add}				PORT ST LUCIE, FL 34953
Remove				
2) Change	D		JAMES MEREDITH	442 SW PEACH STREET
X Add				PORT ST LUCIE, FL 34983
Remove				
3) Change				
Add				
Remove				
4) Change				
Add		·		
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. <u>If an</u>	E. <u>If amending or adding additional Articles, enter change(s) here</u> : (Attach additional sheets, if necessary). (Be specific)			
	icn additional sheets, if necessary).	(Be specific)		
N/A				
•				

<u>.</u>				
F. If ar	n amendment provides for an excha	nge, reclassification, or	r cancellation of issued shares,	
pro	ovisions for implementing the amen	lment if not contained	in the amendment itself:	
1 1 / A	(if not applicable, indicate N/A)			
<u>N/A</u>		<u> </u>		
		-		

The date of each amendment(s)	adoption: OCTOBER 10,2012
Effective date if applicable:	OCTOBER 10, 2012
in appreciate.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(1011118 8 5 117)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	11/12
Signature	Semi-
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	BARRY JONES
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)