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Amend News 10-7-11

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: M; D; Builders Inc.
DOCUMENT NUMBER: P 0 3 0 0 0 1 5 7 1 5 3
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Thomas Stewart Name of Contact Person
Mi Di Builders Inc.
P.O. Box 60
Address
Sparr FC 32192
City/ State and Zip Code
ELPAYNE @hughes.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (352) 817 - 9548 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

FILED 1:1 OCT -6 PM 3: 46

SEGRETARY OF STATE **Articles of Incorporation** (Name of Corporation as currently filed with the Florida Dept. of State) (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:	o, riorida oidia		roju corporation a	dopia the follows
A. If amending name, enter the new name of	f the corporation	<u>n:</u> N/A		
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "C	Corp," "Inc," or "	Co". A professiona	The new ated" or the l corporation
B. Enter new principal office address, if app (Principal office address MUST BE A STREE				- N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)				— — N/A —
D. If amending the registered agent and/or r new registered agent and/or the new regis			la, enter the name o	<u>f the</u>
Name of New Registered Agent:				N/A
New Registered Office Address:	(Flor	ida street address)		
New Registered Agent's Signature, if changir	(City)		, Florida (Zip Code)	
I hereby accept the appointment as registered a			pt the obligations of	the position.
$\frac{-}{S}$	ignature of New	Registered Agent,	if changing	WIA

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)

<u>Title</u>	Name	Address	Type of Action
<u>Sec.</u>	Wordell Frazier	POBOYLED Spari FC 32192	Add Remove
			Add Remove
	ling or adding additional Articles, enter distributional sheets, if necessary). (Be spec		
provisio	nendment provides for an exchange, recons for implementing the amendment if of applicable, indicate N/A)	classification, or cancellation of i not contained in the amendmen	ssued shares,
	,		

The date of each amendment(s	adoption: Uctober 1, 2011
Effective date <u>if applicable</u> :	October I 2011
	(no more than 90 days after amendment file date)
	(CHECK ONE) adopted by the shareholders. The number of votes cast for the amendment(s)
by the shareholders was/were	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):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	,,,
(1	voting group)
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 action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated/	0/1/11
Signature	Mora Mothera
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	Thomas W. Skwart
	(Typed or printed name of person signing)
	President
•	(Title of person signing)