## P03000157956

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

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NAME OF CORPOR	RATION: Dave's Framing, Ir	nc.			
DOCUMENT NUMB	BER: P03000157956				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Wade Wilson				
		Name of Contact Person	<del></del>		
	Wade Wilson CPA PA				
	Firm/ Company				
	1124 East Yonge St.				
	Address				
	Pensacola, FL 32503				
	City/ State and Zip Code				
	davesframing@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatic	n concerning this matter, pleas	se call:			
David Anderson		at (	516-3802		
Name	of Contact Person	Area Co	de & Davtime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Dept	irtment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Dave's Framing, Inc.		FILED
(Name of Corporation	n as currently fi	filed with the Florida Mont of State)
P03000157956		PH 4: 29
(Docume	int Number of C	Corporation (if known) TALLE Fig. 105.00
Pursuant to the provisions of section 607,1006, Florida sits Articles of Incorporation:	Statutes, this <i>Flo</i>	INCLAHA SEL STATE  Iorida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the cor	poration:	
		The new
	or "Co". A p	mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	RESS )	
		··· ,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX		
D. If amending the registered agent and/or registere new registered agent and/or the new registered of		ss in Florida, enter the name of the
Name of New Registered Agent		
	(Florida street	t address)
New Registered Office Address:		. Florida
NAME OF THE PROPERTY OF THE PR	<i>tCi</i>	City) (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I		th and accept the obligations of the position.
Sionate	ure of New Reoi	gistered Agent, if changing
Эдин	many near nego	America (Agont) is consigning
Check if applicable  ☐ The amendment(s) is 'are being filed pursuant to s. 60	07,0120 (11) (e),	). F.S.

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 Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>8V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	S	Kylan S Anderson	4924 Arpad Street
<u>х</u> Add			Milton, FL 32583
Remove			
2) X Change	PT	David Anderson	4924 Arpad Street
Add			Milton, FL 32583
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

<mark>If amending</mark> or Attach <i>addition</i>	adding additional Au al sheets, if necessary)	rticles, enter chai ). (Be specific)	nge(s) here:			
<u> </u>					<del></del>	·
						<del></del>
			<del></del>			
		<del></del>				
			<u></u>			<del></del> -
			<u>-</u>	·	<del></del>	
			<del> </del>	<del> </del>		
f an amendme	nt provides for an ex	change, reclassif	ication, or cance	llation of issued s	shares,	
provisions for (if not app	implementing the an licable, indicate N/A)	nendment if not c	contained in the	amendment itsel	<u>f:</u>	
	,					
			<del></del>			
					-	
						_

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The date of each amendment(s) ad date this document was signed.	option	if other than the
_	/2024	
Effective date <u>if applicable</u> :	2024	
	(no more than 90 days aft	er amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep		tory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	nted by the incorporators, or board of d	irectors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number ficient for approval.	of votes cast for the amendment(s)
	oved by the shareholders through voting arch voting group entitled to vote sepa	
"The number of votes east t	or the amendment(s) was/were sufficient	nt for approval
by		·''
,	(voting group)	
08/29/2024		
DatedSignature	nil Mulan	
(By a dii	ector, president or other officer - if di	
	, by an incorporator – if in the hands o ed fiduciary by that fiduciary)	a receiver, trustee, or other court
	David Anderson	
•	(Typed or printed name of p	erson signing)
	President	

(Title of person signing)