10400002920

| (Re | equestor's Name) | | |
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| (Ad | ldress) | | |
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NCHAMAN)

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF COI | RPORATION: TOVAR DRYW | VALL CONSTRUCTION COMPAN | IY, INC. |
|--|--|---|---|
| DOCUMENT N | UMBER: P0400002920 | | |
| The enclosed Arr | icles of Amendment and fee a | are submitted for filing. | |
| Please return all | correspondence concerning th | is matter to the following: | |
| W | ENDY TOVAR | | |
| _ | (Name | of Contact Person) | |
| то | VAR DRYWALL CONSTRUCTION | ON COMPANY, INC | |
| | (Fi | rm/ Company) | |
| 107 | 70 INDIES DR. N | | |
| | | (Address) | · · · · · · · · · · · · · · · · · · · |
| JAC | CKSONVILLE, FL 32246 | | |
| | | tate/ and Zip Code) | |
| For further inform | nation concerning this matter, | please call: | |
| WENDY TOVAR | | at (904) 998-7206 | |
| (Nai | ne of Contact Person) | (Area Code & Daytime | e Telephone Number) |
| Enclosed is a che | ck for the following amount: | | |
| ☑ \$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) |
| Mailing AddressStreet AddressAmendment SectionAmendment SeDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines STallahassee, FL 32314Tallahassee, FL | | erations eet | |



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 1, 2004

WENDY TOVAR TOVAR DRYWALL CONSTRUCTION COMPANY, INC. 10770 INDIES DR. N. JACKSONVILLE, FL 32246

SUBJECT: TOVAR DRYWALL CONSTRUCTION COMPANY, INC.

Ref. Number: P0400002920

We have received your document for TOVAR DRYWALL CONSTRUCTION COMPANY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

IF YOU WISH, CALL ME BEFORE RETURNING THE DOCUMENT, SO THAT I CAN CHECK AND HOLD THE NAME FOR YOU.

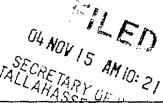
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist

Letter Number: 604A00062564

Articles of Amendment Articles of Incorporation



TOVAR DRYMALL CONSTRUCTION COMPANY INC.

| TOVAIN | (Name of corporation as | currently filed with | the Florida Dep | ot, of States E. FLORIDA |
|--------------|---|----------------------|-----------------|---------------------------------|
| | P0400002920 | | | $\mathcal{L}_{\mathcal{L}_{i}}$ |
| | (Document | number of corporat | ion (if known) | |
| | e provisions of section 607.1 lowing amendment(s) to its | - | | rida Profit Corporation |
| NEW CORPO | ORATE NAME (if changi | ig); | | |
| T.A.T.J.P. | ENTERPRISES, INC | | | |
| | e word "corporation," "company," corporation must contain the word | | | |
| | NTS ADOPTED- (OTHER Title(s) being amended, add | | | |
| ARTICLE VII: | TO ADD TWO NEW COR | PORATE OFFICE | RS | |
| NAME: | WENDY TOVAR | TITLE: SECRET | ARY/TREASU | RY |
| ADDRESS: | 10770 INDIES DR. NOR | пн | JACKSONVIL | LE, FL 32246 |
| NAME: | PABLO C. ANTEZANA | TITLE: VICEPR | ESIDENT | |
| ADDRESS: | 11479 WEST MANDARIN | GLEN CIRCLE | JACKSONV | ILLE, FL 32256 |
| | | | | |
| | | | <u> </u> | |
| | (Attach | additional pages if | necessary) | |
| | ent provides for exchange, re | classification, or | r cancellation | |

(continued)

| The date of each amendmen | t(s) adoption: 09/24/2004 |
|---|---|
| Effective date if applicable: | 09/24/2004 |
| - | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| • | was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval. |
| | was/were approved by the shareholders through voting groups. The t must be separately provided for each voting group entitled to vote mendment(s): |
| "The number of | f votes cast for the amendment(s) was/were sufficient for approval by |
| | (voting group) |
| and shareholder act | was/were adopted by the board of directors without shareholder action tion was not required. was/were adopted by the incorporators without shareholder action and |
| shareholder action | |
| Signed this 24TH day of | SEPTEMBER 2004 |
| Signature | Workship ! |
| (By a consequence) | director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) |
| JOS | E HUMBERTO TOVAR |
| | (Typed or printed name of person signing) |
| PRE | SIDENT |
| | (Title of person signing) |

FILING FEE: \$35