POY000056380

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ac | idress) | · |
| (Ac | ldress) | · |
| (Cit | ty/State/Zip/Phone | #) |
| PICK-UP | WAIT | MAIL |
| (Bu | isiness Entity Nam | ie) |
| (Do | cument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only

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ALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations DEM IMPROVEMENTS, INC. NAME OF CORPORATION: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: at (352) 442-1448 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **Street Address**

enclosed)

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

(Additional Copy

is enclosed)



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 20, 2004

MELANIE LLOYD D & M IMPROVEMENTS, INC. 15059 SWITCH BACK ROAD BROOKSVILLE, FL 34609

SUBJECT: D & M IMPROVEMENTS, INC.

Ref. Number: P04000056380

We have received your document for D & M IMPROVEMENTS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The incorporator(s) cannot be amended or changed. Please correct your document accordingly.

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) 245-6882.

Maryanne Dickey Document Specialist

Letter Number: 604A00060209

November 9, 2004

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

ATTN: Maryanne Dickey Document Specialist

RE: Letter Number 604A00060209

Dear Ms. Dickey,

In reference to the above-mentioned letter, I do not have another copy of the Articles of Amendment, so I've just crossed out Article #6. We had our accounting/tax service incorporate our business for us, paid her \$388.00, and it was done completely incorrectly. We've had quite a "mess" to clean up after her, and we have since hired a new accountant, so hopefully we're getting back on the right track.

If this is unacceptable, please forward another Articles of Amendment form to us as soon as possible. Also, if there are any questions, please feel free to contact me at (352)796-2874.

Thanks for your assistance.

Sincerely,

Melanie Lloyd

Milanelle

D&M Improvements, Inc. 15059 Switchback Road

Brooksville, FL 34609

Articles of Amendment to Articles of Incorporation of

| Name of corporation as currently filed with the Florida Dept. of State) |
|--|
| (Name of corporation as currently filed with the Florida Dept. of State) |
| P0400057.380 |
| (Document number of corporation (if known) |
| (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: |
| NEW CORPORATE NAME (if changing): |
| (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") |
| AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) |
| ARTICLE 6 HAME TODRESS OF MARCH CHAMBE TO |
| A Het BALLOW, PEOGRA HAB MEERSTE-ALL |
| ARTICLE 7 "OFFICERS AND DIRECTORS" Change to Reflect |
| DAVID WILLOUD AS PRESIDENT AND MELANIE A. LLOYD |
| PS VICE PRESIDENT |
| |
| |
| (Attach additional pages if necessary) |
| If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) |
| |
| |

(continued)

| The date of each amendment(s) adoption: 10 7 04 |
|--|
| Effective date if <u>applicable</u> : 10/7/04 (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) (CHECK ONE) |
| ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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) |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. |
| Signed this 7^{+h} day of OCTOBER, 2004. Signature OMM |
| (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
| (Typed or printed name of person signing) |
| (Title of person signing) |

FILING FEE: \$35