POY000658512

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
		1

Office Use Only



400311749374

04/11/18--01019--030 **35.00

TALLAHAMMEN STATE

APR 12 2018
T. LEAGEUX



COVER LETTER

TO: Amendment Section Division of Corporations

. .

NAME OF CORPORA	TION: ALL MY SONS A	ALUMINUM INC		
DOCUMENT NUMBE				
	Amendment and fee are su	ibmitted for filing.		
Please return all correspondent	ondence concerning this ma	tter to the following:		
J.	AMES ELLIS ELKINS			
		Name of Contact Perso	n	
А	LL MY SONS ALUMINU	M INC		
_		Firm/ Company		
P	O BOX 20	This company		
		Address		
G	ENEVA FL 32732			
_		City/ State and Zip Cod	le	
ALLM'	YSONSINC@ATT.NET			
	-	sed for future annual report	notification)	
For further information of MICHELLE CLOSE	concerning this matter, pleas		349-9994	
Name of	Contact Person	at (Area Co	349-9994 ode & Daytime Telephone Number	
Enclosed is a check for t	he following amount made			
■ \$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)	
	g Address	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment to Articles of Incorporation of

ALL MY SONS A	ΑL	UN	(I)	٧U	JM.	INC
---------------	----	----	-----	----	-----	-----

ALL WIT SONS ALOWINGWING				
(Name of Corporation	n as currently	iled with the Florida De	pt. of State)
P04000058512				
(Docume	ent Number of C	orporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this <i>FI</i>	orida Profit Corporation	adopts the f	ollowing amendment(s
A. If amending name, enter the new name of the cor	poration:			
name must be distinguishable and contain the word "Corp" "Inc.," or Co" or the designation "Corp,' word "chartered," "professional association," or the a	""Inc," or "Co	". A professional corpo		
B. Enter new principal office address, if applicable:				
(Principal office address MUST BE A STREET ADDI	RESS)			<u> </u>
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
				
D. If amending the registered agent and/or registere		s in Florida, enter the na	ame of the	
new registered agent and/or the new registered o	ffice address:			
Name of New Registered Agent				
	(Florida street	address)		
New Registered Office Address:			, Florida	
	(C	ity)		(Zip Code)
New Registered Agent's Signature, if changing Registered agent. I hereby accept the appointment as registered agent.	am familiar wit			sstagn.
Signal	ure of New Reg	istered Agent, if changing	Signal Si	4 4 5 6 7 6 7 7 8 9 9 9 9 9 9 9 9 9 9

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 Jone	<u>s</u>	
X Add	<u>sv</u>	Sally Smit	<u>h</u>	
Type of Action (Check One)	<u>Title</u>	N	l <u>ame</u>	<u>Addres</u> s
1) Change	VP	_ N	MICHELLE ALENE CLOSE	200 W MAIN ST
<u>X</u> Add				GENEVA FL 32732
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
1	
	· · ·
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an and an analysis of issued shares, and and an analysis of the amendment itself:

The date of each amendment date this document was signed		, if other than the
	04/04/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on the	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/wee by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendmenter sufficient for approval.	ent(s)
	re approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	older
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
04/04 Dated	/2018	
Signature	James E Elking Sk.	
(B	by a director president or other officer—if directors of officers have not be elected, by an incorporator—if in the hands of a receiver, trustee, or other copointed fiduciary by that fiduciary)	
	JAMES ELLIS ELKINS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	