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/D-	aventada Nama)	
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone) #)
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(Do	cument Number)	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amend 09/15/10

COVER LETTER

TO: Amendment Section

Division of Cor	porations		
NAME OF CORPO	DRATION: PHOUNIC	I hemodeling + Co	nstruction, Inc.
DOCUMENT NUM	IBER: _ POH 000	062765	
The enclosed Article	es of Amendment and fee a	re submitted for filing.	
Please return all corr	espondence concerning thi	s matter to the following:	
_	Amanda	K. Kane ame of Contact Person	
_	Pyranid Lemod	eling - Coustruction Firm/Company	n. Inc.
_	16035 Harbon	ur Palmo Dr. Address	
_	For+ Myers,	FC 33908 ty/ State and Zip Code	
		The Carthink NIF	
For further informati	on concerning this matter,	please call:	
Angle of Name of	Contact Person	at (<u>239</u>) <u>225-5</u> Area Code & Daytime Tele	phone Number
Enclosed is a check to		ade payable to the Florida Departi	
535 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 Add Amendment		Street Address Amendment Section	
Division of C		Division of Corporations	
P.O. Box 632		Clifton Building	
Tallahassee, 1		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	eling And Constr	ruction Inc.
(Name of Corporation as cur		wn)
<u> </u>	2765	
•	umber of Corporation (if kno	own)
rsuant to the provisions of section 607.10 endment(s) to its Articles of Incorporation:	906, Florida Statutes, this F	Iorida Profit Corporation adopts the
If amending name, enter the new name	of the corporation:	
me must be distinguishable and contain breviation "Corp.," "Inc.," or Co.," or th me must contain the word "chartered," "pr	he designation "Corp," "Inc	c," or "Co". A professional corpora
Enter new principal office address, if aprincipal office address <u>MUST BE A STRE</u>		
	4	
Enter new mailing address, if applicabl	lo:	
(Mailing address MAY BE A POST OFF		
(Mailing address MAY BE A POST OFF If amending the registered agent and/or new registered agent and/or the new reg	registered office address i	n Florida, enter the name of the
(Mailing address MAY BE A POST OFF	registered office address i	n Florida, enter the name of the
(Mailing address MAY BE A POST OFF If amending the registered agent and/or new registered agent and/or the new reg	registered office address i	
(Mailing address MAY BE A POST OFF If amending the registered agent and/or new registered agent and/or the new registered agent: Name of New Registered Agent:	registered office address i	

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
DIR	Kyle Vealey	3401 E 2019 St Alva, R 33920	□ Add □ Remove
F. <u>Ifan a</u>	mendment provides for an exchange, re	eclassification, or cancellation of	issued shares,
(if r	ons for implementing the amendment in applicable, indicate N/A)	Thot contained in the amendmen	it itseir:
- LM			

The date of each amendment	(s) adoption: 8/1/10
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/web by the shareholders was/web	re adopted by the shareholders. The number of votes cast for the amendment(sere sufficient for approval.
	re approved by the shareholders through voting groups. The following stateme d 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/wer action was not required.	re adopted by the board of directors without shareholder action and shareholde
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	9/9/10
	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court
	ointed fiduciary by that fiduciary)
	Amanda K. Hane (Typed or printed name of person signing)
	(Typed of printed name of person signing)
	Tive of the second seco
	(Title of person signing)