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SECRETARY OF STATE

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JAN 1 2 2023 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	WILLIAMS HOM	IE IMPROVEMENTS OF	CALHOUN, INC.	_			
DOCUMENT NUMBER: P04000087737							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence	concerning this ma-	tter to the following:					
RENEE	E CRAWFORD						
		Name of Contact Persor	1				
RUTH	ATTAWAY CPA						
		Firm/ Company	···				
16216 ?	NW ASHLEY SHIV	VER ROAD					
 		Address					
ALTHA	ALTHA, FL 32421						
City/ State and Zip Code							
E-ma	al address: (to be us	sed for future annual report	notification)				
For further information concerning	ng this matter, pleas	se call:					
RENEE CRAWFORD		850 at (674-2995	(2	2		
Name of Contact	Person	Area Coo) de & Daytime Telephone N	iumbte:	0221		
Enclosed is a check for the follow	wing amount made	payable to the Florida Depa	artment of State:	LL AH	2022 OCT 11		
•	3.75 Filing Fee & rtificate 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)	TARY OF STATE AHASSEE, FL	1 AM 8: 55	J	

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

WILLIAMS HOME IMPROVEMENTS OF CALHOUN, INC.

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name of Corpo	oration as currently filed with the Florida Dept. of State)
P04000087737	
(D	Occument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of t	the corporation:
	The new rd "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc," or "Co". A professional corporation name must contain the word abbreviation "P.A."
B. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>E BOX</i>)
D. If amending the registered agent and/or registered agent and/or the new registered	gistered office address in Florida, enter the name of the
Name of New Registered Agent	From C T
New Registered Office Address:	(Florida street address) (Florida street address) (City) (City)
New Registered Agent's Signature, if changing thereby accept the appointment as registered ago	ក្នុ
	Signature of New Registered Agent, if changing
Check if applicable	

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>c</u>	
X Remove	<u>V</u>	Mike Joi	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	D	_	SEAN SKIDMORE	21053 NE CR 274
Add X Remove				ALTHA, FL 32421
2) Change		_		
Add Remove 3) Change		_		
Add Remove 4) Change		_		
Add Remove 5) Change Add		_		
Remove 6) Change Add		_		
Pamoua				

	mal sheets, i	if necessary).	(Be specific)				
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nrovisions fo	<u>ient provia:</u> er impleme	es for an exco	nange, reclassif ndment if not (<u>ication, or can</u> contained in th	<u>cellation of issi</u> e amendment	itself	
(if not ar	oplicable, inc	dicate N/A)	nament ii not t	tomanica in th	e unicidancia.	itsett.	
							
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		· <u></u>	·				

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	s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date	?)
	is block does not meet the applicable statutory filing requirement Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareh	holder action and shareholder
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the ange sufficient for approval.	nendment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendme	_
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	1-25-2-2-	
(By sele	a director, president or other officer – if directors or officers have ected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	WILLIAM G. HAMIL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	