## P04000094984

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T. LEWIS

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Williamsburg Millwork, DOCUMENT NUMBER: P04000094984 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Brian M. Mark, Esq. Name of Contact Person Law Office of Brian Michael Mark, P.A. Firm/Company 100 Church Street Address 34741 Kissimmee, FL City/ State and Zip Code bmark@marklawfirm.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Brian M. Mark, Esq. 932-3933 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy . Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** 

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

**Amendment Section Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment** to · Articles of Incorporation of

FILED 12 APR 20 PM 12: 21

Williamsburg Millwork, Inc.

## (Name of Corporation as currently filed with the Florida Dept. of State)

SECRETARY AF STATE TALLAHASSEE PLORIDA

P04000094984

(Document Number of Corporation (if known)

nent(s) to

	word "corporation," "company," or "incorporated" or the acorp," "Inc," or "Co". A professional corporation name must a the abbreviation "P.A."
Enter new principal office address, if applica	ble: 100 Church Street
ncipal office address <u>MUST BE A STREET A</u>	
•	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE I	BOX) 100 Church Street
	<del></del>
	<u>Kissimmee, FL 34741</u>
	•
Name of New Registered Agent Brian	ed office address:  M. Mark, Esq.  Office of Brian M. Mark, P.A.
Name of New Registered Agent  Law O	ed office address:  M. Mark, Esq.  Office of Brian M. Mark, P.A.  (Florida street address)
Name of New Registered Agent  Law O	ed office address:  M. Mark, Esq.  Office of Brian M. Mark, P.A.  (Florida street address)  Church Street, Kissimmerida 34741
Name of New Registered Agent  Law O	ed office address:  M. Mark, Esq.  Office of Brian M. Mark, P.A.  (Florida street address)
Name of New Registered Agent  Law O	ed office address:  M. Mark, Esq.  Office of Brian M. Mark, P.A.  (Florida street address)  Church Street, Kissimmerida 34741
Name of New Registered Agent  Law O  New Registered Office Address: 100  Registered Agent's Signature, if changing R	ed office address:  M. Mark, Esq.  Office of Brian M. Mark, P.A.  (Florida street address)  Church Street, Kissimmerida 34741  (City)  (Zip Code)
Name of New Registered Agent  Law O  New Registered Office Address: 100  Registered Agent's Signature, if changing R	ed office address:  a M. Mark, Esq.  Office of Brian M. Mark, P.A.  (Florida street address)  Church Street, Kissimmerida 34741  (City) (Zip Code)

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 <math>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	PT John Do	<u>e</u>		
X Remove	V Mike Jon	nes	,	
_X Add	SV Sally Sm	<u>aith</u>		:
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s
1) Change Add X Remove	<u>P</u>	Glenn Williams	<u>.                                    </u>	114 Eastpark Drive Celebration, FL 3474
2) Change Add X Remove	<u>v</u>	Tracey Williams		114 Eastpark Drive Celebration, FL 3474
Change Add Remove	PS. I	Eddy Colebunders	<del></del>	100 Church Street Kissimmee, FL 34741
4) Change Add Remove		. ,		
5) Change Add Remove	·		<del></del> .	
6) Change Add Remove				

amending or adding additional Articles, enter ttach additional sheets, if necessary). (Be spec	rific)
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an amendment provides for an exchange, recl	assification, or cancellation of issued shares,
rovisions for implementing the amendment if (if not applicable, indicate N/A)	not contained in the amendment itself:
(ij noi applicaole, inalcale WA)	
· · · · · · · · · · · · · · · · · · ·	<del></del>
•	· · · · · · · · · · · · · · · · · · ·
<del> </del>	No. 1996
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The date of each amendment(s) adopt	ion: 4-18-12	
Effective date if applicable:	The state of the s	1
	(no more than 90 days after	amendment file date)
Adoption of Amendment(s)	(CHECKONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of ent for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each	d by the shareholders through voting a voting group entitled to vote separat	
	ne amendment(s) was/were sufficient	or approval
by	(voting group)	
The amendment(s) was/were adopted action was not required.  The amendment(s) was/were adopted action was not required.		
	18-12	
Signature	r, president or other officer - if direct	2
selected, by appointed fic	an incorporator—if in the hands of a r luciary by that fiduciary)	
	(Typed or printed name of person	n signing):
The state of the s	(Title of person signing)	