## P04000161635

(Re	equestor's Name)	
(Ac	ldress)	
· (Ac	ddress)	
(Ci	ty/State/Zip/Phone #	<del>)</del>
PICK-UP	☐ WAIT	MAIL
(Bt	usiness Entity Name	)
(Do	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	
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Office Use Only



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09 DEC 11 AM 10: 00 Secretary of State All ahasset florid.

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## **COVER LETTER**

TO: Amendment Section    Division of Corporations				
NAME OF CORPORATION: Building Designs & Consulting Inc.				
DOCUMENT NUMBER: DO4000/6/635				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Monty Anderson  Name of Contact Person  Building Designs & Consulting Tre.  Perm/Company				
• • •				
11537 Lake Underhill Rd.				
Address				
Onlano, Fl. 32825  City/ State and Zip Code				
_				
E-mail address: (to be used for fujure annual report notification)				
For further information concerning this matter, please call:				
Name of Contact Person at (467) 380 6983  Area Code & Daytime Telephone Number				
Name of Contagt Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)				
Mailing Address Street Address				
Amendment Section Amendment Section  Division of Corporations Division of Corporations				
Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle				

Tallahassee, FL 32301



November 30, 2009

MONTY ANDERSON 11537 LAKE UNDERHILL RD ORLANDO, FL 32825

SUBJECT: BUILDING DESIGNS & CONSULTING, INC.

Ref. Number: P04000161635

We have received your document for BUILDING DESIGNS & CONSULTING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

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) 245-6916.

Letter Number: 309A00036668

Carol Mustain Regulatory Specialist II

## Articles of Amendment

to

**Articles of Incorporation** 

Bulliam Design	of L	. 14:			7A.18	
(Name of Corporation as current	ly filed with th	1e Florida Dep	t. of State)	<del></del>	E B	
_			,		i i	<u> </u>
Do 4000/6/635 (Document Number	er of Corporation	on (if known)				im □
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statute	s, this <i>Florida</i>	Profit Corp	o <i>oration</i> ad	Since Bollow	ving
A. If amending name, enter the new name of the BUILDING DESIGN Cename must be distinguishable and contain the	meents	, Inc	pany,'' or	"incorpora	The new ted" or the	
abbreviation "Corp.," "Inc.," or Co.," or the de name must contain the word "chartered," "profes	esignation "Ĉoi	rp," "Inc," or	"Co". A p.	rofessional		
B. Enter new principal office address, if application (Principal office address MUST BE A STREET)	able:				perhill	Rel.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>' BOX</u> )	SAME	A> 1	4/30ve	<del>-</del> <del></del>	
D. If amending the registered agent and/or reg new registered agent and/or the new registe			ida, enter t	he name of		
Name of New Registered Agent:	<u> </u>	}				
New Registered Office Address:	(Florid	la street addres:	s)			
			, F	lorida		
	(City)		(Zip Co	de)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			cept the obli	gations of t	he position.	
Sign	nature of New I	Registered Agen	nt, if changin	ng		

## 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** ☐ Add ☐ Remove □ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,

If an amendment provides for an 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)

The date of each amendment	t(s) adoption: $\frac{12-1-09}{12-12-12}$
Effective data if applicable	(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/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
• •	re approved by the shareholders through voting groups. The following statement of 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)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
Dated	2-1-09
sele	a director, president or other officer – if directors or officers have not been extend, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	Monty L. Anderson (Typed or printed name of person signing)
	(Title of person signing)