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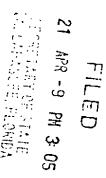
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### Articles of Amendment

to Articles of Incorporation

Winter Park Construction & Remodeling CO	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P Ø 5 Ø Ø Ø Ø 4 8 3 3 5	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>corporation</i> adopts the following amendment(s) Incorporation:	to its Articles of
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain "chartered," "professional association," or the abbreviation "P.A."	The new "Corp.," the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent  221 Circle Dr.  (Florida street address)	
New Registered Office Address: 1) artland Florida 37751 (City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.  Signature of New Registered Agent, if changing	<b>.</b> ;

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> <u>Joh</u>	n Doc	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		Tracy S. Forrest	24 Circle Dr.
Add Remove  2) Change Add	P	Jeffrey D. Forrest	Martland, FL 32751 221 circle Dr Martland, F1
Remove 3) Change			3275
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<del></del> _	
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			

# Page 2 of 6

The corporation, in accordance with the required minimum status vote, elects to be a Florida Profit Benefit Corporation accordance with s. 607.604, F.S.  The purpose for which the benefit corporation is organized is to create a general public benefit and:				
The purpose for which the benefit corporation is organized is to create a general public benefit and:				
	<del></del>			
The general and/or specific public benefit(s) to be created by the corporation (in addition to its general purpose) is follows (optional):				
The additional qualifications of Benefit	The additional qualifications of Benefit Director(s), if any, are as follows:			
-	<del></del>			
The name(s) and address(es) of the Ben	nefit Director(s) and/or Benefit Officer(s), if any:			
	nefit Director(s) and/or Benefit Officer(s), if anv:			
The name(s) and address(es) of the Ben	nefit Director(s) and/or Benefit Officer(s), if any:  Name and Title:			
The name(s) and address(es) of the Ben Name and Title:	nefit Director(s) and/or Benefit Officer(s), if any:  Name and Title:  Address:			
The name(s) and address(es) of the Ben Name and Title:	Name and Title:  Address:			
The name(s) and address(es) of the Ben Name and Title:	nefit Director(s) and/or Benefit Officer(s), if any:  Name and Title:  Address:			
The name(s) and address(es) of the Ben Name and Title:  Address:  The corporation, in accordance with the	Name and Title:  Address:			



The additional qualifications of Benefit Director(s), if any, are no longer applicable and are hereby deleted.

ie:				
15.				
he public benefit for which the corporation is organized is:				
	<u>-</u>			
The specific public benefit(s) to be created	d by the corporation (in addition to the above) is/are as follows (optional):			
, , , , , , , , , , , , , , , , , , , ,	- by the emporation (in addition to the above) israte as follows (optionary).			
The additional qualifications of Benefit Di	he additional qualifications of Benefit Director(s), if any, are as follows:			
The name(s) and address(es) of the Beneti	t Director(s) and/or Benefit Officer(s), if any:			
Name and Title:	Name and Title:			
Address:				
	Address:			
	(Include attachment if necessary)			
The corporation, in accordance with the re-	quired minimum status vote, terminates its status as a Florida Profit Socia			
orporation in accordance with s. 607.505. F.S. The revised purpose for which the corporation is organized is as follows:				



The additional qualifications of Benefit Director(s), if any, are no longer applicable and are hereby deleted.

	If amending or adding additional Articles, enter change(s) here:
	(Attach additional sheets, if necessary). (Be specific)
_	<del></del>
-	
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ļ	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(s) acd date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
i	(voting group)	
The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	15/21	
Signature(By <del>u di</del> selected	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court	_
	ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Fresident	
-	Title of person signing)	

# WAIVER OF NOTICE OF CHANGE OF REGISTERD AGENT

**OF** 

## Winter Park Construction & Renovation CO

- 1. The name of the Non-Operating Company is Winter Park Construction & Renovation CO.
- 2. The address including street and number of its present registered office as shown in the records of the Secretary of State of Florida, at the time of statement is 221 Circle Dr. Maitland, Florida, 32751.
- 3. The name of the present Officer/Director, as shown in the records of the Secretary of State of Florida, prior to this filing is Tracy S. Forrest, President.
- 4. The name of the present registered agent, as shown in the records of the Secretary of State of Florida, prior to this filing is Tracy S. Forrest.
- 5. The name of the new Officer/Director is Jeffrey D. Forrest, President.
- 6. The name of the new registered agent is Jeffrey D. Forrest.
- 7. Such change was authorized by the members of management as Tracy S. Forrest died in October of 2020.

Winter Park Construction & Renovation CO

By: President

State of Florida Country of Orange

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this 4/5/21 by Jeffrey D. Forrest, of Winter Park Construction & Renovation CO, a Florida corporation, on behalf of the corporation. He/she is personally known to me or has produced \_\_\_\_\_\_ as identification.

type of identification

COURTNEY VESPA

Notary Public - State of Florica
Commission # GG 121876

My Comm. Expires Apr 9, 2023
Bonded through National Notary Assn.

Signature of person taking acknowledgment

Coviting Vesya

Name typed, printed or stamped

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Title or rank

Note of person taking acknowledgment

Coviting Vesya

Title or rank

Note of person taking acknowledgment

Coviting Vesya

Serial number, if any

