

P05000055762

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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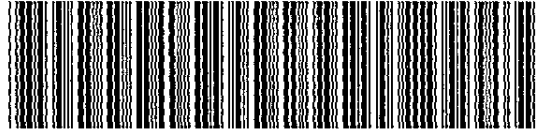
(Business Entity Name)

(Document Number)

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FILED
05 OCT 21 AM 11:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
SB

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Contractor's Services Sales, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P05000055762

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William P. Kelly

(Name of Person)

Contractor's Services Sales, Inc.

(Name of Firm/Company)

1877 Northgate Blvd., Suite Two

(Address)

Sarasota, FL 34234

(City/State and Zip Code)

For further information concerning this matter, please call:

Tamra M. Tornai

(Name of Person)

at (941)

351-0812

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☒ \$52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 5, 2005

WILLIAM P. KELLY
1877 NORTHGATE BLVD.
SUITE 2
SARASOTA, FL 34234

SUBJECT: CONTRACTOR'S SERVICES SALES, INC.
Ref. Number: P05000055762

We have received your document for CONTRACTOR'S SERVICES SALES, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6909.

Velma Shepard
Document Specialist

Letter Number: 005A00060530

RECEIVED
05 OCT 21 AM 8:00
DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CONTRACTOR'S SERVICES SALES, INC

DOCUMENT NUMBER: 705000055762

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

WILLIAM P. KELLY
(Name of Contact Person)

CONTRACTOR'S SERVICES SALES, INC
(Firm/ Company)

1877 NORTHGATE BLVD, SUITE TWO
(Address)

SARASOTA FL 34234
(City/ State and Zip Code)

For further information concerning this matter, please call:

TAMRA M. TORNAL at (941) 351 0812
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 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 Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Articles of Amendment
to
Articles of Incorporation
of

CONTRACTORS SERVICES SALES
(Name of corporation as currently filed with the Florida Dept. of State)

FILED
05 OCT 21 AM 11:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PO5000055762

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

AMENDING/ADDING OFFICERS/DIRECTORS AS FOLLOWS:

ROBERT A GREENWALT HAVING RESIGNED AS PRESIDENT,

OFFICERS ARE AS FOLLOWS:

- TAMBA M TORNAL AS VICE PRESIDENT (EXISTING)

1877 NORTHGATE BLVD SARASOTA FL 34234

- WILLIAM P KELLY AS PRESIDENT (ADD)

1877 NORTHGATE BLVD SARASOTA FL 34234

(Attach additional pages if necessary)

If an amendment provides for 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)

51 SHARES OF CORP. STOCK ARE EXCHANGED FROM

ROBERT A GREENWALT TO WILLIAM P. KELLY

(continued)

The date of each amendment(s) adoption: 15 April 2005

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signature Tamra M. Tornai
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

TAMRA M. TORNAI
(Typed or printed name of person signing)

Vice President
(Title of person signing)

FILING FEE: \$35