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COVER LETTER

TO: Amendment Section Division of Corporations ar Built Dochs Inc DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) Street Address Mailing Address Amendment Section Amendment Section

Division of Corporations

Taliahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment

to Articles of Incorporation

FILED

3:52

	of	you action	2018 HOY 28	5
	Her Built	Docks I	17(1)	Υii (——
(Name of Co	rporation as currently f	iled with the Florida De	ept. of State) ALL AHASSE	∪: 'ς' • = Γ/
	PAFCOC	211 <i>6</i> 11¢		· - L. (
	(Document Number of C	orporation (if known)		
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	6. Florida Statutes, this Flo	orida Profit Corporation	adopts the following amendmen	ıt(s) to
A. If amending name, enter the new name	of the corporation:			
			The new	
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association.	n "Corp." "Inc." or "Co	". A professional corp	porated" or the abbreviation pration name must contain the	
B. Enter new principal office address, if an (Principal office address MUST BE A STRE			•	
(· · · · · · · · · · · · · · · · · · ·	· ·			
C. Enter new mailing address, if applicable				
(Mailing address <u>MAY BE A POST OFF</u>	TCE BOX			
D. If amending the registered agent and/or		s in Florida, enter the n	ame of the	
new registered agent and/or the new re	gistered office address:			
Name of New Registered Agent			·	
	(Florida stree	t address)		
New Registered Office Address:			. Florida	
ren negisierea omee maness.	(0	ity)	(Zip Code)	
New Registered Agent's Signature, if chan	ging Registered Agent:		t the section	
I hereby accept the appointment as registered	t agent. – t am familiar wi	n and accept the obligat	ions of the position.	
	Signature of New Rey	gistered Agent, if changir	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)

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> John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	SY	Doravon J. Taylor	408 W 11st Street
Add		l	Chraballe FL 30300
Remove	1		
2) Change Add	SV	Itavis Millender	408 W 11st Street Omabelle FL 3230
Remove			Collina To To To A
3) Change			
Add			
Remove			
4) Change		<u></u>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>f amending or adding additional A</u>		age(s) here:		
Attach additional sheets, if necessary). (Be specific)			
				
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	<u> </u>			
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- 			-	
				
		<u> </u>		
f an amendment provides for an e	vehange, reclassif	ication, or cancel	llation of issued sh	ares.
provisions for implementing the a (if not applicable, indicate NA)		contained in the a	imenament itself:	
(9	,			
			<u> </u>	<u></u> .
	 		· · · · · · · · · · · · · · · · · · ·	
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	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	() () () () () () () () () ()	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were se	opted by the shareholders. The number of votes cast for the amendmen afficient for approval.	1(s)
The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders through voting groups. The following states reach voting group entitled to vote separately on the amendment(s):	nent
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and sharehol	der
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	98/30/8	
Signature		
(By at c	director, president or other officer - if directors or officers have not bee	
	ed, by an incorporator if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	urt
арроц	The Manual of the Control of the Con	
	Keid Hiels	
	(Typed or printed name of person signing)	
	PIPE.	
	(Title of person signing)	

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