

P05000124743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Marvin R. Perkins GAVE

AUTHORIZATION BY PHONE TO

CONTACT Add Officer title/AS

DATE 12-16-05

BY Donnell

Office Use Only



600062066966

12/12/05--01019--007 \*\*35.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 DEC 12 PM 12:14

Amendment  
12/16/05  
DC

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: PERKINS Walls & Textures, Inc.

DOCUMENT NUMBER: P05000124743

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

Please return all correspondence concerning this matter to the following:

BRENNAN R. PERKINS  
(Name of Contact Person)

PERKINS Walls & Textures, Inc.  
(Firm/ Company)

PO Box 1507  
(Address)

Hilliard FL 32046  
(City/ State and Zip Code)

For further information concerning this matter, please call:

MARVIN R. PERKINS at ( 904 ) 845-4137  
(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

PERKINS WALLS & TEXTURES, INC.

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

P05000124743

(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)**

adding:

Robert L. Addair - AS

Rt3 Box 1140

Callahan, FL 32011

as an "officer" (10% - ten percent) of Corporation

(Attach additional pages if necessary)

For implementing the amendment if not contained in the amendment herein (if not applicable, indicate how)

(continued)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 DEC 12 PM 12:14

The date of each amendment(s) adoption: 09-01-2005

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 Brennan R. Perkins  
(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)

BRENNAN R. PERKINS  
(Typed or printed name of person signing)

President  
(Title of person signing)

**FILING FEE: \$35**