106000002992

-	(Requestor's Name)	
	(Address)	
((Address)	
	(City/State/Zip/Phone	#)
		
PICK-UP	WAIT 1	MAIL
. 1	(Business Entity Nam	e)
	(Document Number)	
○ Certified Copies	: Certificatës.	of Status
Special Instructions	to Filing Officer	
Special instructions	to Filing Officer.	





300162193023

- 11/02/09--01016--020 **35.00j

Amend

ವಿಜಯ ಚಿತ್ರಚಿತ್ರ.

09 HOV 18 PH 2: 28
SECRETARY OF STATE



November 4, 2009

ROBERT D CHALK JR. ROBERT CHALK FRAMING, INC. 4855 ELKTON ELKTON, FL 32033

SUBJECT: ROBERT CHALK FRAMING, INC.

Ref. Number: P06000002992

We have received your document for ROBERT CHALK FRAMING, 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):

Page 3 of the amendment form is missing.

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) 245-6892.

Letter Number: 209A00034849

Tina Roberts Regulatory Specialist II

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	ROBERT CHALK FRAMING	S, INC
DOCUMENT NU	JMBER:	P06000002992	
The enclosed Artic	cles of Amendment and fe	e are submitted for filing.	
Please return all co	orrespondence concerning	this matter to the following:	
	R	OBERT D. CHALK JR.	
		Name of Contact Person	
	ROBE	RT CHALK FRAMING, INC	
	Firm/ Company		
	4855 ELKTON		
Address			
	ELKTON, FL 32033		
	-, 	City/ State and Zip Code	
	ROBERTCHA	LKFRAMING@YMAIL.COM used for future annual report notification)	-
	E mail address: (10 00		
For further inform	ation concerning this matt	er, please call:	
RC	BERT D CHALK	ut (2-1374
Name	e of Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a chec	k for the following amoun	t made payable to the Florida Depart	ment of State:
2 \$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		Street Address Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	;
		Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

ROBERT CHALK FRAMI (Name of Corporation as currently filed with a P06000002992 (Document Number of Corporation Possible	NG INC.	TALLANDARY PHY
(Name of Corporation as currently filed with	the Florida Dept. of Sta	ite) TALLINET PA
P06000002992		471488700
(Document Number of Corporati	ion (if known)	SEE FIST
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Profit</i>	Corporation adopts the follo
A. If amending name, enter the new name of the corporation	<u>n:</u>	
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associa	orp," "Inc," or "Co"	A professional corporation
B. Enter new principal office address, if applicable:	7581 SR 207	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	ELKTON, FL 3203	33
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. 868 ST.AUG	. FL 32085
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade	address in Florida, end dress:	ter the name of the
Name of New Registered Agent: LORI J BOW	DEN	teles
New Registered Office Address: 3018 RUSSE (Flori	ELL RD ida street address)	
GREENCOVI (City)		_, Florida <u>32043</u> p <i>Code)</i>
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami Signature of New		2

11/18/09

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)

Title	Name	Address	Type of Action
ST	TAMMY CHALK	2162 CENTURY BLVD EAST ST. AUG. FL 32084	Add Remove
ST	LORI J BOWDEN	3018 RUSSELL RD GREENCOVE, FL 32043	☑ Add ☐ Remove
			Add Remove
E. If amen (attach a	ding or adding additional Articles dditional sheets, if necessary). (B	e specific)	
provisi	mendment provides for an exchapons for implementing the amendant to the applicable, indicate N/A)	nge, reclassification, or cancellation of issuent if not contained in the amendment	ued shares,

. 1	he date of each amendmen	t(s) adoption; 10/28/2009
Effective date <u>if applicable</u> :		10/28/2009 (date of adoption is required)
		(no more than 90 days after amendment file date)
A	Adoption of Amendment(s)	(CHECK ONE)
E		ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
		ere 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)
ב	The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
Q	The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
	Dated 10/2	28/2009
	sel	a director, president or other officer - if directors or pricers have not been ected, by an incorporator - if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
		ROBERT D CHALK JR.
		(Typed or printed name of person signing)
		President
		(Title of person signing)