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SECRETARY OF STATE.
TALLAHASSEF FINALE.

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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ORATION:	ROB'S DRYWALL & STU	ICCO, INC.	
DOCUMENT NUM	NT NUMBER: 20-4966856			
The enclosed Article	es of Amendment and fe	ee are submitted for filing.		
Please return all cor	respondence concerning	this matter to the following:		
	Ŗ	OBERT P. TOGNACCI		
		Name of Contact Person		
_	ROB'S	DRYWALL & STUCCO, INC.		
		Firm/ Company		
_		10672 154TH ROAD N		
		Address		
· 	JI	JPITER FL 33478-6832		
		City/ State and Zip Code		
	E-mail address: (to be	used for future annual report notification	on)	
For further informat	ion concerning this mat	ter, please call:		
	RT P. TOGNACCI		385-4931	
	of Contact Person	Area Code & Daytim	-	
Enclosed is a check	for the following amour	nt made payable to the Florida Do	epartment of State:	
	☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Ado Amendment Division of O P.O. Box 63	Section Corporations	Street Address Amendment Section Division of Corporation Clifton Building	s	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	VI.		
ROB'S DRYWA	ALL & STUCCO, IN	1C.	
(Name of Corporation as curre			
P060	000075995		
(Document Num	ber of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this F	lorida Profit Corporation ado	pts the following
A. If amending name, enter the new name of	the corporation:		
			The new
name must he distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "prof	designation "Corp," "Inc	e," or "Co". A professional c	
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREET</u>			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u></u>		09 S
D. If amending the registered agent and/or renew registered agent and/or the new registered agent: Name of New Registered Agent:	egistered office address in tered office address:	n Florida, enter the name of t	FILED EP-8 PM 4: 37 RETARY OF STATE AHARSEE, FLORIDA.
			37 PATE PRIS
New Registered Office Address:	(Florida street a	oddress)	P
_	(Ciry)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing in the hereby accept the appointment as registered agent.		nd accept the obligations of the	e position,
Si	gnature of New Registered	l Agent, if changing	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	BONNIE L. ROCK	10672 154TH ROAD N JUPITER FL 33478-6832	[] Add [] Remove
·			
			
	ding or adding additional Articles, of ditional sheets, if necessary). (Be		
<u>provisi</u> e		e, reclassification, or cancellation of nt if not contained in the amendmen	

The date of each amendmen	
Effective date <u>if applicable</u> :	JUNE 15, 2009 (date of adoption is required)
, applicable.	(no more than 90 days after amendment file date)
Adontion of Amendment(s)	(CHECK ONE)
` •	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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	33
•	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
action was not required.	se adopted by the incorporators without shareholder action and shareholder
Dated_JUN	NE 15, 2009
Signature _ (B	a director, president or other officer – if directors or officers have not been
sel	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	ROBERT P. TOGNACCI
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)