P07000000728

(Re	equestor's Name)			
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C. LEVISCO, 2014

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Cabinet Creations of Pinellas Inc. P07000000718 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 1th Way No. Unit A Cabinet creations e live .com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address **Street Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to



Articles of Incorporation of

	Articles of Incorp	oration	50 10 1 3		
Cahine + Crea	tions of	Pinella	5, Im.		
(Name of Corporation as currently filed with the Florida Dept. of State)					
707000000728					
(Document	Number of Corporation (if kr	nown)			
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this <i>Flo</i>	rida Profit Corporation add	pts the following amendment(s) to		
A. If amending name, enter the new nam	ne of the corporation:				
			The new		
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designal word "chartered," "professional association	tion "Corp," "Inc," or "Co	". A professional corporat	ated" or the abbreviation		
B. Enter new principal office address, if					
(Principal office address MUST BE A ST	REET ADDRESS)				
					
C. Enter new mailing address, if applica					
(Mailing address MAY BE A POST O	FFICE BOX				
	-	······································			
		_			
D. If amending the registered agent and new registered agent and/or the new		in Florida, enter the name	e of the		
Name of New Registered Agent					
Name of Wen Acgistered rigem					
-	(Florida street	address)			
New Registered Office Address:		, Florida			
	(City)		(Zip Code)		
New Registered Agent's Signature, if ch. I hereby accept the appointment as register	anging Registered Agent: red agent. I am familiar with	h and accept the obligations	of the position.		
Sio	nature of New Registered Age	ent, if changing			
5181	o o, negisior ou nge	, 9 *			

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	PT Jo	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ully Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		Jeremy Smith	6235 Fallingleaf Ct
Add Remove			Pinellas Park Florida 33782
2) Change	_5	Carl Turner	6922 46" Way No. Pinellas Park
Remove 3) Change			Florida 33781
Add			
4) Change			
Add Remove			
5) Change	<u> </u>		
Remove			
6) Change			
Remove			

	(Be specific)	
		-
or an area described for an area	shames malacrification or agreeallation of issued charges	
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares, lendment if not contained in the amendment itself:	
If an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:	
provisions for implementing the amo	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:	
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provisions for implementing the amo	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:	

The date of each amendment(s) adoption: June 4th, 2014 DIVISION OF CORPORATIO date this document was signed. 14 JUN 16 PM 12: 4	NS if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nt(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"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.	older
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 6.4.14 Signature John R. Showler	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	
Tohn R. Strawhacker (Typed or printed name of person signing)	
President (Title of person signing)	