P07000004678

•
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: chalmers drywall corporation				
DOCUMENT NUMBER: p07000004678				
The enclosed Articles of Amendment and fee are	e submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
	nn chalmers Contact Person)			
(17thire of	Conditi i cisony			
	ners drywall n/ Company)	 		
E 2.76	D forwood de			
	<u>O foxwood dr</u> Address)			
	ota fl. 342321			
For further information concerning this matter, p	te and Zip Code)			
john chalmers	at (941) 780-3788			
(Name of Contact Person)	(Area Code & Daytime Tel	lephone Number)		
Enclosed is a check for the following amount ma	ade payable to the Florida Depart	ment of State:		
☑\$35 Filing Fee	S43.75 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	e		

Tallahassee, FL 32301

•	ticles of Amendment to cles of Incorporation of	OB OCT SECRET
chalmers	drywall corporation	20
(Name of Corporation as curi	ently filed with the Florida Dept. of State	
——————————————————————————————————————	700004678 mber of Corporation (if known)	1 2: 23
Pursuant to the provisions of section 607.100 following amendment(s) to its Articles of Inco		Corporation adopts the
A. If amending name, enter the new name of	of the corporation:	
The new name must be distinguishable of incorporated" or the abbreviation "Corp.," "Co". A professional corporation nam association," or the abbreviation "P.A."	""Inc.," or Co.," or the designation "C	orp," "Inc," or
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
D. If amending the registered agent and/or new registered agent and/or the new reg		r the name of the
New Registered Office Address:	(Florida street address)	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if change I hereby accept the appointment as registere position.		the obligations of the
 -	Signature of New Registered Agent, if chang	ging

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>	Name	Address	Type of Action
<u>v.p.</u>	ken jones	4936 andrew ave sarasota fl 34231	Add Remove
<u>Sec</u>	Nohn D Chalmers	5370 FOXWOOD DI SAMASOTA FI 34232	Add Remove
E. If amend	ling or adding additional Articles, enter	r change(s) here:	
	dditional sheets, if necessary). (Be spec		
F. If an an	nendment provides for an exchange, re	classification, or cancellation of is:	sued shares.
provisio	ons for implementing the amendment if ot applicable, indicate N/A)		
			

The date of each amendment(s) adoption: 10/15/2008		
Effective date if applicable:	10/15/2008	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	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 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	,"	
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
sel		
••	john chalmers (Typed or printed name of person signing)	
	president	
	(Title of person signing)	