

POXXXX7521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

09/20/10--01023--006 **35.00

(Business Entity Name)

(Document Number)

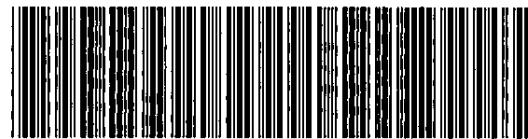
Certified Copies _____ Certificates of Status _____

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9/20/10



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Done

2010 SEP 20 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



Law Offices
of
N. MICHAEL KOUSKOUTIS, P.A.

N. Michael Kouskoutis
Attorney at Law

623 East Tarpon Avenue
Tarpon Springs, FL 34689
Ph: 727-942-3631
Fax: 727-937-5453

September 16, 2010

Florida Dept. of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: **DDR Drywall, Inc.**
Document No. P07000007521

Dear Ladies/Gentlemen:

I enclose herewith a check payable to the Florida Dept. of State in the amount of \$35.00 to cover the cost of filing the attached Amendment.

If you have any questions or concerns, please do not hesitate to contact this office.

Sincerely yours,

N. MICHAEL KOUSKOUTIS, P.A.

By: 
Joni L. Buscema
Legal Assistant to
N. Michael Kouskoutis, Esquire

NMK/jlb
Encs. As referenced above

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DDR DRYWALL, INC.

DOCUMENT NUMBER: P07000007521

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

Please return all correspondence concerning this matter to the following:

J. BUSCEMA

Name of Contact Person

N. MICHAEL KOUSKOUTIS, P.A.

Firm/ Company

623 E. TARPON AVENUE

Address

TARPON SPRINGS, FL 34689

City/ State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joni

Name of Contact Person

at (727)

942-3631

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

<input checked="" type="checkbox"/> \$35 Filing Fee	<input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	<input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
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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

DDR DRYWALL, INC.

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

P07000007521

(Document Number of Corporation (if known))

FILED
2010 SEP 20 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

11145 MT. MOCKINGBIRD ROAD

BROOKSVILLE, FL

34614

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

DENNIS A. KOPEC

11145 MT. MOCKINGBIRD ROAD

(Florida street address)

BROOKSVILLE

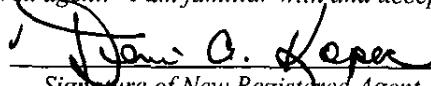
, Florida 34614

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered 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>	<u>Address</u>	<u>Type of Action</u>
PSTD	DENNIS A. KOPEC	11145 MT. MOCKINGBIRD ROAD BROOKSVILLE, FL 34614	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

N/A

• The date of each amendment(s) adoption: AUGUST 30, 2010
(date of adoption is required)
• Effective date if applicable: AUGUST 30, 2010
(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(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.

Dated AUGUST 30, 2010

Signature Dennis A. Kopec

(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)

DENNIS A. KOPEC

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)