

PO7000057102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

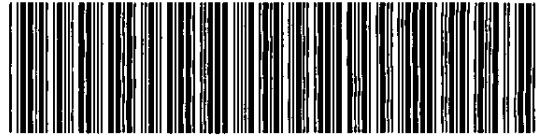
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Amend

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JAN 20 PM 2:05

T. Roberts JAN 27 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BOBBY DILLON DRYWALL INC.

DOCUMENT NUMBER: P07000057102

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

Please return all correspondence concerning this matter to the following:

BOBBY DILLON
(Name of Contact Person)

BOBBY DILLON DRYWALL INC.
(Firm/ Company)

159 SEASONS DR.
(Address)

PUNTA GORDA FL 33983
(City/ State and Zip Code)

For further information concerning this matter, please call:

BOBBY DILLON at (941) 815-6024
(Name of Contact Person) (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) |
|---|--|---|--|

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

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

(Document Number of Corporation (if known))

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

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

(Florida street address)

_____, Florida _____
(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>
<u>V.P.</u>	<u>JEFF S. M'CURDY</u>	<u>1512 PRODER ST.</u> <u>PORT CHARLOTTE, FL</u> <u>33952</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>V.P.</u>	<u>DENNIS WETZEL</u>	<u>22178 CATHERINE AVE</u> <u>PORT CHARLOTTE, FL</u> <u>33952</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>T</u>	<u>CHESTER SNYDER JR.</u>	<u>211 ROCKWOOD WAY</u> <u>ENGLEWOOD FL</u> <u>34223</u>	<input checked="" 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)

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)

The date of each amendment(s) adoption:

1-12-2009

Effective date if applicable:

1-12-2009

(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

1-12-2009

Signature

Bobby Dillon

(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)

BOBBY DILLON

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)