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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ORATION: Wettermann Home	es, Inc	·	
DOCUMENT NUM	P07000086985		<u></u>	
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	Kurt Wettermann			
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Perso	n	
	Wettermann Homes, Inc			
		Firm/ Company		
	2797 Windsor Heights St			
		Address	· · · · · · · · · · · · · · · · · · ·	
	Deltona, Fl 32738			
		City/ State and Zip Cod	e	
	kurt@wettermannhomes.com	n		
	E-mail address: (to be us	sed for future annual report	notification)	
	`	·	·	
For further informati	on concerning this matter, plea	se call:		
Kurt Wettermann		at ( 321	377-6016	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check (	or the following amount made	payable to the Florida Dep	artment of State:	
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 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			Address	
	vision of Corporations	Amendment Section Division of Corporations		
	), Box 6327	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

to

A	rticles	αf	Incor	rnars	tion
		v	IMEGI	. pos 2	eres:

Welte	or Imainn	Homes	INC	
(Name of Corpora	tion as currently	filed with the Florida	Dept. of State)	
P <i>U</i> :	70000	861985		
(Doct	ument Number of	Corporation (if known)		
ursuant to the provisions of section 607.1006, Flori Articles of Incorporation:	da Statutes, this F	lorida Profit Corporation	n adopts the follow	ving amendment
If amending name, enter the new name of the	corporation:			
me must be distinguishable and contain the word "			400	The new
nc.," or Co.," or the designation "Corp," "Inchartered," "professional association," or the abb <u>Enter new principal office address, if applicab</u> rincipal office address <u>MUST BE A STREET AL</u>	reviation "P.A."   le:	professional corporation	n name must con	tain the word
				2
				020
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	OX)			,
	_			1/2
				RII 1 03
If amending the registered agent and/or registered new registered agent and/or the new registered		ss in Florida, enter the i	name of the	: 03
Name of New Registered Agent				
	(Florida stree	t address)	<del> </del>	— <del>-</del>
New Project and Coffee Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,		
New Registered Office Address:	(C	ity)	, Florida (Zi,	p ('ode)
v Registered Agent's Signature, if changing Re	gistered Agent:			
reby accept the appointment as registered agent.	l am familiar wit	h and accept the obligati	ions of the position	r,
Sion	nature of New Rev	istered Agent if changing	<del></del>	_
Sign	nature of New Reg	istered Agent, if changing	<u>-</u>	_

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>x</u> :	
X Remove	<u>Y</u>	Mike Jo	one <u>s</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	<u>v</u>	_	GARDNER, HAROLD, JR	2797 Windsor Heights St
Add				Deltona, Fl 32738
X Remove				
2) Change		_		
Add				
Remove 3) Change	<del></del>	_		
Add				
Remove				<del></del>
4) Change		_		
Add				
Кепюче				<del></del>
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

ttach additional sheets, if necessary).	(Be specific)
	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ames	adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

. .

The date of each amendment(s date this document was signed.	) adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehol	lder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amer sufficient for approval.	ndment(s)
must be separately provided	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment (ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
06/24/20 Dated	220	
Signature K	urt Wettermann	
selec	director, president or other officer – if directors or officers have noted, by an incorporator – if in the hands of a receiver, trustee, or officed fiduciary by that fiduciary)	
	Kurt Wettermann	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	<u>.</u>

. . . . . .