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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: CPR KITCHENS & BATHS INC. DOCUMENT NUMBER: PO 7000122823 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: TROY LAY

Name of Contact Person Firm/ Company 2606 VALENCIA GROVE DR.
Address VALRICO F1. 33596 City/ State and Zip Code F.mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813) 244-4891 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 (Additional Copy enclosed) 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

Articles of Amendment to Articles of Incorporation

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CPR KITCHENS & BATHS, INC.

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P07000122823	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2606 VALENCIA GROVE BR.
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	VALRICO
	FL 33596
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2606 VALENCIA GROVEBR. VALRICO EL. 33596
	VALRICO EL.
	33596
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	lress in Florida, enter the name of the
Name of New Registered Agent 7/204 5	RAY
2606 VAZ	ENCIA GROVE DR reet address)
New Registered Office Address: VALRICO	Florida 33596
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Jorney ffle	Registered Agent, if changing
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)

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	<u>PT</u> .	John Doe	
X Remove	<u>v</u> !	Mike Jones	
X Add	<u>sv</u>	Sally Smith	•
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		PETERSON, CHRISTOPA	HER L
Add			4301 BALINGTON DR.
X Remove			VALRICO, PL. 33596
2) Change	P	RAY, TROY S.	2606 VALENCIA GROVEDA
X Add			VALRICO, FI.
Remove			33596
3) Change	CEO	RAY, TINA B.	2606 VALENCIA GROVE DR
X Add			VALRICO, FI.
Remove			32596
4) Change		<u></u>	
X Add			
Remove			
5) Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			

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The date of each amendment(s) adoption: 9/25/2017	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	I not be listed as the
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)	
(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.	
$Dated = \frac{9/35/2017}{2000000000000000000000000000000000000$	
Signature (C) is a signature of the sign	·*
(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)	
CHRISTOPHEL LEE TETELSON (Typed or printed name of person signing)	
TRESIDENT.	
(Title of person signing)	