## P07000/3/199

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

APPROVED AND FILFD



## COVER LETTER \*

TO: Amendment Section Division of Corporations				
/ <del>-</del>	Decky Installation			
DOCUMENT NUMBER: FIN # 33-	1194707			
The enclosed Articles of Amendment and fee are submitted	d for filing.			
Please return all correspondence concerning this matter to t	he following:			
	hulz			
	ne of Contact Person  PCKY Installation			
11/162 0 11	Firm Company			
4483 Golden Lake Dr.				
_ /	Address			
Sansota, FL	34233			
City/ State and Zip Code				
Heidi. Weiler	@ gmail.com			
E-mail address: (to be used for future animal report notification)				
For further information concerning this matter, please call:				
10 Tartier information concerning this matter, please can.				
Heidi Schulz	at (813) 956-9277 Area Code & Daytime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable	e to the Florida Department of State:			
Certificate of Status Ce	3.75 Filing Fee & Certified Copy dditional copy is aclosed)  \$\int_{\subseteq} \frac{1}{2}			
Mailing Address	Street Address			
Amendment Section Division of Corporations	Amendment Section			
LUVISION OF COMPARATIONS	I httisian at L'amorations			

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

## Articles of Incorporation

Rubber Decky Installation	
(Name of Corporation as currently filed with the Florida Dept. of State)	₹.,,
EIN # 33-1194707	5033
(Document Number of Corporation (if known)	学品
(2 statistic realists of corporation (12 late vity)	AND I
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	Medius Medius
A. If amending name, enter the new name of the corporation:	15.
Resource Direct, Inc.	RE Thew
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must coword "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  5500 Bee Ridge Rid	d.
SUITE#204	
Sarasota, FL 3423	3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  4483 Golden Lake	Oc.
Serasota, FL 34233	3
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	
(Florida street address)	
New Registered Office 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)

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>	Name	Address
1) Change		<del>-</del>	
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change		<del></del>	<del></del>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>	_	_
Add			
Remove			

Attach <i>addit</i>	or adding additional Attional Sheets, if necessar	y). (Be specific)	<del></del>		
				<u>.</u>	
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**************************************		<del> </del>	· · · · · · · · · · · · · · · · · · ·		
provisions	lment provides for an e for implementing the a applicable, indicate N/A	<u>amendment if not co</u>	cation, or cancellat ontained in the amo	ion of issued shares, endment itself:	
<del></del>	<del></del>				
				·	
					,

date this document was signed.	II other than the
Effective date if applicable: Of 24 13 (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)	
(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 09/24/13	
Signature	
(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)	
(Typed or printed name of person signing)	
O	
PRES	_
(Title of person signing)	