P08000051982

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Document Number)		
Certified Copies	Certificate:	s of Status
Special Instructions to Filing Officer:		

Office Use Only



300274073833

08/23/15--01014--003 **43.75

SECRE JARY OF STAIL DIVISION OF CORPORATIONS

JUL 1 2015 C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: All WAATHER SAFEROOMS, INC			
DOCUMENT NUMBER: POGOSOS1987			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Richard M Ault Name of Contact Person			
Name of Contact Person			
All WHATHER SAFEROOMS, INC			
Firm/ Company			
P.O. BOX 8091			
Address			
Southfort F1 3240 9 City/ State and Zip Code			
City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Richard M Auth at (850) 258-2-753			
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:			
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)			
Mailing Address Street Address			

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 to Articles of Incorporation

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

15 JUN 23 PM 2: 41

All Wentler	SAFERDOMS, INC
(Name of Corporation	n as currently filed with the Florida Dept. of State)
Pa	081600 51984
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	
	The new "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDR</u>	3275 Crystal Lake Dr CHipley F/ 32498
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5046Hport F1 32409
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent	
New Registered Office Address:	(Florida street address) Hip Q y , Florida 32438 (Sity) (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:	, unu our	ry Sman, Sr as an Maa.	
Example: X Change	PT	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	<u>Addres</u> s
1) Change	PS	KIVIN W. JuliAN	3003 WOODYMATION Drive
Add			cHipley F1 32478
Remove			
2) L Change	17	Richard M. Ault	3275 crystal LABRONIUS
Add			CHIPLEY 6/32428
Remove			
3) Change	<u> 17</u>	Hoppy SuliAN	5003 woody marrow oring
Add			chipley 11 32429
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amendi</u>	ing or adding additional Articles, enter change(s) here: Iditional sheets, if necessary). (Be specific)
(жиасл <i>аа</i>	
	NA
If an ame	endment provides for an exchange, reclassification, or cancellation of issued shares, as for implementing the amendment if not contained in the amendment itself:
(if n	ot applicable, indicate N/A)
	NA
<u></u>	
	

The date of each amendment(s) adoption:	FILE OF SHIBther than the
date this document was signed.	SECRETARY OF SIMILARY THAN THE DIVISION OF GORPORATIONS
Effective date if applicable:	PM 2: 41
(no m	ore than 90 days after amendment file dails JUN 23 PM 2: 41
Note: If the date inserted in this block does not meet document's effective date on the Department of State's	the applicable statutory filing requirements, this date will not be listed as the records.
Adoption of Amendment(s) (CHECK C	<u>DNE</u>)
The amendment(s) was/were adopted by the shareholders was/were sufficient for approva	lders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the sharel must be separately provided for each voting group	nolders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment	•
by	,n
(voting gro	up)
☐ The amendment(s) was/were adopted by the board of action was not required.	f directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporaction was not required.	rators without shareholder action and shareholder
Dated6/18/1	<u>'S</u>
Signature Fullant	Im sulf
	other officer – if directors or officers have not been or – if in the hands of a receiver, trustee, or other court
appointed fiduciary by tha	
<i>K</i>	icHard M. Ault
(Typed	or printed name of person signing)
	LP & greasurer
	(Title of person signing)