P08000073752

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000249724 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name ·: CSH SERVICES, LLC

Account Number : I20070000160

Phone : (800)494-3124

Fax Number : (561)455-9885

COR AMND/RESTATE/CORRECT OR O/D RESIGN

C&J'S FORT KNOX, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Help Help Corporate Filing Menu

Articles of Amendment to Articles of Incorporation of

C&J'S FORT KNOX, I	NC.		
(Name of Corporation as currently filed with	the Florida Dept. of Stat	<u>e</u>)	
P08000073752			
(Document Number of Corporat	ion (ii known)		
Pursuant to the provisions of section 607.1006, Florida Statu following amendment(s) to its Articles of Incorporation:	ites, this <i>Florida Profit</i> (Corporation adop	ts the
A. If amending name, enter the new name of the corporation	<u>n:</u>		
GREEN HOME INNOVAT			
The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co. "Co". A professional corporation name must contain ussociation," or the abbreviation "P.A."	," or the designation "C	Corp." "Inc." or	กล พูกษ .
B. Enter new principal office address, if applicable:	500 NW 1ST AVE	<u>≾≋_</u> -	- [
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	FT. LAUDERDALE	FL 33301	
			ے م
		市局 (D D
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	500 NW 1ST AVE		
	FT. LAUDERDALE F	FL 33301	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade		r the name of the	
Name of New Registered Agent:		,	
New Registered Office Address: (Flori	ida street address)		
,	(0:1)	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, If changing Registered A le hereby accept the appointment as registered agent. I am position.		the obligations o	of the
Signature of New	Registered Agent, if chang	ging	

Page 1 of 3

H 08000249724-3

	ing the Officers and/or Directors, ente and title, name, and address of each C		
	ditional sheets, if necessary)		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add

		Add Remove
		□ Add □ Remove
Ε.	If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
_		
۲.	If an amendment provides for an exchange, reclassification, or cancellation of iss provisions for implementing the amendment if not contained in the amendment is (if not applicable, indicate N/A)	ued shares, tself:

Page 2 of 3

4-08000249724-3

The date of each amendment(s) adoption: 10-29-2008
Effective date if applicable: (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 11/4/2008
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)
JEREMY RICE
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)