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Division of Corporations

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Account Number : I20000000257 Phone

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Fax Number

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OR AMND/RESTATE/CORRECT OR O/D RESIGN

C.P.J. INSTALLATION INC

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Corporate Filing Menu

Help

10/16/2008

https://cfile.sunbiz.org/scripts/efilcovr.exe

. .*

Articles of Amendment to Articles of Incorporation of

| | O). | | | |
|---|---|-------------------------------------|----------------------|------------|
| CRI.IN | ISTALLATION IN | C | | |
| (Name of Corporation as cu | rrendly filed with th | e Florida Dent. of St | ate) | |
| | 08000088257 | | | |
| (Document N | unaber of Corporation | n (if known) | | • . |
| Pursuant to the provisions of section 607.1 following amendment(s) to its Articles of Inc. | | s, this <i>Florida Profi</i> i | Corporation adop | u the |
| A. If amending name, enter the new name | of the corporation: | Į. | | |
| The new name must be distinguishable "incorporated" or the abbreviation "Corp. "Co". A professional corporation na association," or the abbreviation "P.A." | .," "Inc.," or Co.," | or the designation | "Corp," "Inc," or | TS TO ATTE |
| B. Enter new principal office address, if a | policables | | | |
| (Principal office address MUST BE A STR | | | | States . |
| C. Enter new mailing address, if applicate (Mailing address MAX BE A POST OF | ole: FICE BOXO | | | |
| D. If amending the registered agent and/o new registered agent and/or the new re | or registered office a egistered office addu | ddress in Florjds, en tas: | iter the name of the | ē |
| Name of New Registered Agent: | ······ | ,, | <u> </u> | |
| New Registered Office Address: | (Florid | a street address) | | |
| | | | Florida | |
| | | (City) | (Zip Code) | |
| New Registered Agent's Signature, if char I hereby accept the appointment as registed position. | nging Registered Ag cred agent. I am fo | <u>ent:</u> miliar with and occo | ept the obligations | of the |
| - | Signature of New I | Registered Agent, if ch | anging | |
| | | | | |

| NO. 9561 | — _{р.} | 3 | _ |
|----------|-----------------|---|-------|
| NO. 3001 | , , | , | |

OCT. 16. 2008 1:02PM CAPITAL CONNECTION

| If amending removed and | the Officers and/or Directors, enter | r the title and name of each offic flicer and/or Director being add | er/director being |
|-------------------------|---|--|----------------------------------|
| (Attach additi | ional sheets, if necessary) | | eter3ec. |
| Title | Name | Address | Type of Action |
| VP | ANGELA J MORERA | 17005 MELBA LN LUTZ, FL 33549 | Add Remove |
| <u>VP</u> | MICHAEL J MILLER | 17005 MELBA LN LUTZ FL 33549 | Add Remove |
| | <u></u> | | Add Remove |
| | ne or adding additional Articles, en litional sheets, if necessary). (Be sp | ecific) | |
| | | | |
| | | | • |
| | | | |
| provision | endment provides for an exchange, is for implementing the amendment applicable, indicate N/A) | reclassification, or cancellation if not contained in the amendm | of issued shares, ent itself: |
| | | | |
| | | | |
| | | | |
| | | Page 2 of 3 | |

| The date of each amendment | (s) adoption: 10/16/08 |
|---|---|
| Effective date if applicable: | (no more than 90 days after amendment file date) |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/wen by the shareholders was/we | e adopted by the shareholders. The number of votes east for the amendment(s) re sufficient for approval. |
| | e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): |
| "The number of votes of | east for the amendment(s) was/were sufficient for approval |
| by | " |
| , | (voting group) |
| The amendment(s) was/wern action was not required. | e adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/wer action was not required. | e adopted by the incorporators without shareholder action and shareholder |
| Dared 10/16 | 5/08 |
| ŝelec | a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) |
| | Angela J Molece (Typed or printed name of person signing) |
| | Pre 31 day 1 (Title of person signing) |