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| PICK-UP                   | WAIT              | MAIL         |
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| Certified Copies          | Certificates      | of Status    |
| Special Instructions to F | Filing Officer:   |              |
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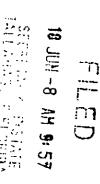
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR  | RATION: CROWN CABINE                        | TRY OF GULF BREEZE,  | INC,   |  |
|---|---|--|--|--|
| DOCUMENT NUMI   | P08000099579                                |  |  |  |
| The enclosed Articles   | of Amendment and fee are su                 | bmitted for filing.  |  |  |
| Please return all corre   | spondence concerning this ma                | tter to the following:   |  |  |
|   | RONALD S. CABASSA                           |  |  |  |
|   |   | Name of Contact Person   | 1  |  |
|   | CROWN CABINETRY OF GULF BREEZE, INC.        |  |  |  |
|   |   | Firm/ Company  |  |  |
|   | 3052 GULF BREEZE PKWY                       | Υ,   |  |  |
|   |   | Address  | -  |  |
|   | GULF BREEZE, FL 32563                       |  |  |  |
|   |   | City/ State and Zip Cod  | e ·  |  |
| rcaba   | ssa@att.net                                 |  |  |  |
|   | E-mail address: (to be us                   | sed for future annual report   | notification)  |  |
|   |   |  |  |  |
| For further informatio  | n concerning this matter, pleas             | se call:   |  |  |
| RONALD S. CABASSA   |   | 850<br>at (  | 572-7840<br>ode & Daytime Telephone Number   |  |
| Name of Contact Person  |   | Area Co  | ode & Daytime Telephone Number   |  |
| Enclosed is a check fe  | or the following amount made                | payable to the Florida Dep   | artment of State:  |  |
| \$35 Filing Fee   | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)         | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |
| Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327 |   | Street Address Amendment Section Division of Corporations Clifton Building |  |  |
| Tallahassee, FL 32314   |   | 2661 Executive Center Circle   |  |  |

Tallahassee, FL 32301

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18 JUN -8 AM 9:57

SECREMANY STATE

## Articles of Amendment to Articles of Incorporation of

| filed with the Florida Dept. of State)   |
|--|
|  |
| orporation (if known)  |
| orida Profit Corporation adopts the following amendment(s) to  |
|  |
| The new  |
| " "company," or "incorporated" or the abbreviation  ". A professional corporation name must contain the  A." |
|  |
|  |
| s in Florida, enter the name of the  |
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| address)   |
| autressy   |
| ity) (Zip Code)  |
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| h and accept the obligations of the position.  |
| istered 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.

| X Change                      | <u>PT</u>    | John Doc    |                 |
|-------------------------------|--------------|-------------|-----------------|
| X Remove                      | <u>V</u>     | Mike Jones  |                 |
| X Add                         | <u>sv</u>    | Sally Smith |                 |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change                     |              |             |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 2) Change                     |              |             |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 3 ) Change                    |              |             |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
| 4) Change                     |              |             |                 |
| Add                           | -            |             |                 |
| Remove                        |              |             |                 |
| 5) Change                     |              |             |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |
|                               |              |             |                 |
| 6) Change                     | -            |             |                 |
| Add                           |              |             |                 |
| Remove                        |              |             |                 |

| Attach additional sheets, if                       | necessary). (Be                        | specific)           |  |  |             |
|--|--|---------------------|--|--|-------------|
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|  |  |                     | <b></b>                                | e:   |             |
| If an amendment provide<br>provisions for implemen | es for an exchange<br>ating the amendm | e, reclassification | n, or cancenation<br>ined in the ameng | i <u>or issued snares</u><br>Ime <u>nt itself:</u> | 7           |
| (if not applicable, in                             | dicate N/A)                            |                     |  | <del>.</del>                                       |             |
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| The date of each amendment(s) addate this document was signed.           | loption:   | , if other than the       |
|--|--|---------------------------|
| Effective date if applicable:  | (no more than 90 days after amendment file date)   |                           |
|  | (no more than 90 days after amenament file date)   |                           |
| Note: If the date inserted in this bedocument's effective date on the De | lock does not meet the applicable statutory filing requirements, this date partment of State's records.  | will not be fisted as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )   |                           |
| ■ The amendment(s) was/were add<br>by the shareholders was/were su       | opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.  |                           |
|  | proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):   |                           |
| "The number of votes east  | for the amendment(s) was/were sufficient for approval  |                           |
| by   |  |                           |
| •  | (voting group)   |                           |
| ☐ The amendment(s) was/were add action was not required.                 | opted by the board of directors without shareholder action and shareholder   |                           |
| ☐ The amendment(s) was/were add action was not required.                 | opted by the incorporators without shareholder action and shareholder  |                           |
| JUNE 4, 26   | 018  |                           |
| Dated Signature  | Lord Statosse  |                           |
| (By a c<br>selecte   | irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) |                           |
|  | RONALD'S, CABASSA  |                           |
|  | (Typed or printed name of person signing)  |                           |
|  | PRESIDENT  |                           |
|  | (Title of person signing)  |                           |