

P09000017518

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(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

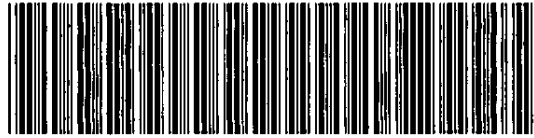
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10 AUG 24 PM 4:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMEND
CPG
8/23



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2010

WILLIAM A. BARRY
PINNACLE PERFORMANCE BUILDERS, INC.
221 SW 12TH TERRACE
CAPE CORAL, FL 33991

SUBJECT: PINNACLE PERFORMANCE BUILDERS, INC
Ref. Number: P09000017518

We have received your document for PINNACLE PERFORMANCE BUILDERS, INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

PLEASE RETURN THE DOCUMENT AND CHECK TOGETHER.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 110A00018218

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2010 AUG 19 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PINNACLE PERFORMANCE BUILDERS, INC

DOCUMENT NUMBER: P09000017518

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

WILLIAM A. BARRY

Name of Contact Person

PINNACLE PERFORMANCE BUILDERS, INC.

Firm/ Company

221 S.W. 12TH TERRACE

Address

CAPE CORAL, FLORIDA 33991

City/ State and Zip Code

VMAZZELLA@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VICTOR J. MAZZELLA, CPA

Name of Contact Person

at (239)

772-2229

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
Tallahassee, FL 32314

Street Address

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

Articles of Amendment
to
Articles of Incorporation
of

PINNACLE PERFORMANCE BUILDERS, INC.

(Name of Corporation as currently filed with the Florida Department of State)

P09000017518

(Document Number of Corporation (if known))

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DEPT. OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the
abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation
name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

New Registered Office Address:

_____ (Florida street 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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	GREGORY F. GOIKE	7372 POMEGRANATE BLVD BOKELIA, FL 33922	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	JESUS H. GOTTFRIED	3528 N.E. JEANNETTE DRIVE JENSEN BEACH, FL 34957	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: JULY 22, 2010

Effective date if applicable: JULY 22, 2010 *(date of adoption is required)*
(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)

☒ 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 7/26/10

Signature ☒ William A. Barry
(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)

WILLIAM A. BARRY

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)