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COVER LETTER

Division of Corporations
NAME OF CORPORATION Summer Builders & Recitors, Inc.
DOCUMENT NUMBER: <u>P09000071725</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
Summer Builders, Inc.
12458 Spring Hill Dr. Address
Spring Hill, FZ 34609 City/State and Zip Code
Summerbuilders in a Cope Content E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (35a) 556 - 4845 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Amendment Section Street Address Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Summer Builders &	Realtons Inc	of State)
(Name of Corporation as currently	filed with the Florida Dept.	of State)
Dagazza 215) ^=	
<u> 70900011</u>	1 05	
(Document Number (of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Florida I</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
Summer Builders &	_	
name must be distinguishable and contain the vabbreviation "Corp.," "Inc.," or Co.," or the desi	word "corporation," "comp	any," or "incorporated" or the
name must contain the word "chartered," "profession		
	~ 1.0	
B. Enter new principal office address, if applicat	ole:	
(Principal office address <u>MUST BE A STREET AL</u>	DUKESS)	
		
C. Enter new mailing address, if applicable:		
(Malling address MAY BE A POST OFFICE B	$\frac{N}{N}$	
	, ,	
		
	4 11 (41 - 22 - 41 - 2 - 27 - 10 - 12 -	
D. If amending the registered agent and/or regist		la, enter the name of the
new registered agent and/or the new registere	d office address:	
Name of New Registered Agent:		
N D : 4 1000 411	(El; 1	
New Registered Office Address:	(Florida street address)	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing R	egistered Agent:	
I hereby accept the appointment as registered agent.		ept the obligations of the position.
Ciona	ture 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)

Title	Name	<u>Address</u>	Type of Action
1Ρ_	The Summer	12453 Spring Hill Dr. Spring Hill, FL 341009	Add Remove
	W. Are and a State of the state		
·			
	ending or adding additional Articles, en additional sheets, if necessary). (Be sp		
		·	
prov	amendment provides for an exchange, isions for implementing the amendment f not applicable, indicate N/A)	reclassification, or cancellation of if not contained in the amendmen	issued shares, it itself:

The date of each amendment(s) a	adoption: 0209
Effective date <u>if applicable</u> :	10/2/Odate of adoption is required)
(no	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	oproved by the shareholders through voting groups. The following statemen reach 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	ting group)
(voi	ting group)
The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated_106	109
Signature	
selected	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Visti Summer
ے	(Typed or printed name of person signing)
	(Title of person signing)