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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Frontier Improven	nents Inc.	
DOCUMENT NUM	IBER: P0000083508		
The enclosed Article	s of Amendment and fee are su	ıbmitted for filing.	
Please return all corr	espondence concerning this ma	itter to the following:	
	Jeffrey S. Bailey, Esq.		
		Name of Contact Perso	n
	The Bailey Law Group PLLO		
	<u> </u>	Firm/ Company	
	PO BOX 140848	Time Company	
	• •	Address	
	Coral Gables, FL 33114		
		City/ State and Zip Cod	e
jbail	ey@me.com		
-		sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call: at (<u>786</u> at (Area Co	, 525-3864
Name	of Contact Person	Area Co	de & Daytime Telephone Number
	or the following amount made		·
S35 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)
An Di [,] P.C	niling Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to

Articles of Incorporation

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FRONTIER IMPROVEMENTS, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P10000083508 (Document Number of Corporation (if known) 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: N/A 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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 (Florida street address) , Florida_ New Registered Office Address: __ (City) 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

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.

Mike Jones, V as Rem Example:	ove, and Sal	ly Smith, SV as an Add.	
X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VPS	Deena Bell Llewellyn	3360 SW 22nd Street, Ste 5
Add			Miami, FL 33145
X Remove			+
2) Change	S	Charles Llewellyn	3360 SW 22nd/Street, Ste 5
Add			Miami, FL 33145
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<u></u>
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	(Be specific)		
N/A			1
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F. If an amendment provides for an exchaprovisions for implementing the amen	idment if not contained in	the amendment itself:	ires,
(if not applicable, indicate N/A) N/A			
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	-	<u>-</u>	

June 23, 2017	
The date of each amendment(s) adoption:late this document was signed.	, if other than the
Effective date if applicable:	Į.
(no more than 90 days after amer	dment file date)
Note: If the date inserted in this block does not meet the applicable statutory fill document's effective date on the Department of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes by the shareholders was/were sufficient for approval.	cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting group must be separately provided for each voting group entitled to vote separately of	
"The number of votes cast for the amendment(s) was/were sufficient for ap	proval
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without sharehold action was not required.	ler action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder a action was not required.	ction and shareholder
Signature (By a director, president or other officer)—if directors of	
selected, by an incorporator – if in the hands of a recei appointed fiduciary by that fiduciary)	er, trustee, or other court
Charles Llewellyn	
(Typed or printed name of person si	gning)
President	

(Title of person signing)