

PI1000000240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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*Amend*

FILED  
2024 JUL 16 AM 11:29  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
2024 JUL 16 PM 2:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 17 2024

A RAMSEY

Incorporating Services, Ltd.

1540 Glenway Drive  
Tallahassee, FL 32301  
850.656.7956  
Fax: 850.656.7953  
www.incserv.com  
e-mail: accounting@incserv.com

incserv

**ORDER FORM**

**TO** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corphelp@dos.myflorida.com  
850-245-6051

**FROM** Melissa Moreau  
mmoreau@incserv.com  
850.656.7953

**REQUEST DATE** 7/16/2024

**PRIORITY** Regular Approval

**OUR REF # (Order ID#)** 1272277

**ORDER ENTITY**

PRECISION BUILDING PRODUCTS, INC.

**PLEASE PERFORM THE FOLLOWING SERVICES:**  
PRECISION BUILDING PRODUCTS, INC. (FL)

File the attached amendment and provide a certified copy.

**NOTES:**

\$43.75 Authorized

**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and  
counner package if applicable. For UCC orders, please include the thru date on the results.

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Precision Building Products, Inc.

DOCUMENT NUMBER: P11000000240

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

Please return all correspondence concerning this matter to the following:

Jorge Salva, Esq.  
Name of Contact Person  
Law Offices of Jorge Salva, PLLC  
Firm/ Company  
270 West 39th Street, Suite 1304  
Address  
New York, NY 10018  
City/ State and Zip Code  
jsalva@jrs-law.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorge Salva, Esq. at ( 201 ) 697-2392  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|--|--|--|--|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
2024 JUL 16 AM 11:29  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

Precision Building Products, Inc.

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

P11000000240

(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:**

*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)

3300 South Congress Ave. Suite 6

Boynton Beach, FL 33426

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

3300 South Congress Ave. Suite 6

Boynton Beach, FL 33426

**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)

New Registered Office 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*

**Check if applicable**

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)(c), F.S.

**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.*

**Example:**

X Change                      PT              John Doe

X Remove                      V              Mike Jones

X Add                              SV              Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>P, D</u>	<u>Jacques Rousseau</u>	<u>1070 DELRAY LAKES DR</u>
<input type="checkbox"/> Add			<u>DELRAY BEACH, FL 33444</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>VPST</u>	<u>Christiane Gilbeault</u>	<u>1070 DELRAY LAKES DR</u>
<input type="checkbox"/> Add			<u>DELRAY BEACH, FL 33444</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>Asst. S</u>	<u>Josee-Anne Guilbeault</u>	<u>6004 Osprey Woods Land</u>
<input type="checkbox"/> Add			<u>Greenacres, FL 33415</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>P</u>	<u>Richard Moss</u>	<u>3300 South Congress Ave., Suite 6</u>
<input checked="" type="checkbox"/> Add			<u>Boynton Beach, FL 33426</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings on the paper.

(if not applicable, indicate N/A)

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☒ 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 Shareholders \_\_\_\_\_  
(voting group)"

7/16/2024  
Dated \_\_\_\_\_

Signature /s/ Richard Moss  
(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)

Richard Moss

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)