P11000050746

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATIO	N: PLUMBRO	OK CABINETRY	′, INC.
DOCUMENT NUMBER: _			
The enclosed Articles of Ame			
Please return all corresponder	nce concerning this ma	tter to the following:	
ALE	X MOGHADA	SI	
		Name of Contact Perso	n
ATL	ANTIC ACCO	UNTING & CON	ISULTING
	<u> </u>	Firm/ Company	
102	38 TIMBERLA	ND POINT DR.	
		Address	
TAN	1PA, FL 33647	7	
- -		City/ State and Zip Cod	e
SAMCP	A@TAMPAB	AY.RR.COM	
E-	mail address: (to be us	ed for future annual report	notification)
For further information conce	rning this matter, pleas	e call:	
ALEX MOGHADA	SI	at (813	, 205-8957
Name of Contr	act Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	llowing amount made	payable to the Florida Depa	artment of State:
	\$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

PLUMBROOK CABINETRY, INC	C		
(Name of Corporation as currently	filed with the Florida Dept	, of State)	
P11000050746			
(Document Number of	f Corporation (if known)		-
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this <i>Florida Proj</i>	fit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the	corporation:	•	
			The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the	p," "Inc," or "Co". A pro	ny," or "incorporated" or the of fessional corporation name must	ontain the
• •			
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD			TILED TILED
			The E
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	2X)		- 0
	<u> </u>		<u></u>
	_		-
D. If amending the registered agent and/or registered new registered agent and/or the new registered		la, enter the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Relative like the Agent's Signature, if changing Relative like the Agent's Signature, if changing Relative like like like like like like like lik		ept the obligations of the position.	
		 _	
Signature of N	ew Registered Agent, if chan	iging	

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	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) × Change Add Remove	S	CONSTANCE M. LACROIX	35444 CHANCEY RD. ZEPHYRHILLS, FL 33541
2) Change Add Remove	<u>T</u>	S. ALEXANDER MOGHADASI	35444 CHANCEY RD. ZEPHYRHILLS, FL 33541
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

f amending or adding additional Artic attach additional sheets, if necessary).	(Be specific)			
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		-		
			-	
f an amendment provides for an excha	inge, reclassifica	tion, or cancell	ation of issued s	hares,
provisions for implementing the amen (if not applicable, indicate N/A)	dment if not co	tained in the a	mendment itself	
			<u></u>	
		- Yenseen	· · · · · · · · · · · · · · · · · · ·	
				
				

The date of each amendment	t(s) adoption: <u>05/01/2012</u>
Effective date if applicable:	05/01/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/web by the shareholders was/web	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	-10-12
Signature	Henry W. LaCroup
(B	by a directof/president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court
· aç	opointed fiduciary by that fiduciary)
	HENRY W. LACROIX
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)