Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To: Division of Corporations Fax Number : (850)617-6380 From: Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON Account Number : I20060000135 : (305)789-3200 Fax Number : (305)789-4137 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** COR AMND/RESTATE/CORRECT OR O/D RESIGN TAMPA CONTRACTORS SUPPLY, INC. Certificate of Status 0 Certified Copy 1 Page Count 04 \$43.75 Estimated Charge

SEP 1 5 2020

Electronic Filing Menu

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Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation of

| TAMPA CONTRACTORS SUPPLY, IN | | <u> </u> | | |
|---|-------------------------------------|---------------------------------------|--------------------------|---------|
| (Name o | of Corporation as currentl | y filed with the Florida Dept | t. of State) | |
| P11000099161 | | | | |
| | (Document Number o | f Corporation (if known) | | |
| Pursuant to the provisions of section 607, its Articles of Incorporation: | 1006. Florida Statutes, this | Florida Profit Corporation & | lopts the following amer | ıdment(|
| A. If amending pame, enter the new n | ame of the corporation: | | | |
| | | | The | ne\J |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "("chartered," "professional association," | Corp, " "Inc, " or "Co" / | 1 professional corporation n | or the abbreviation "Co | гр., " |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | 5017 N. Coolidge Avenue | 1 | |
| | | Tampa, FL 33614 | | _ q |
| | | |)70 | |
| | | | (f) | — : J |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | <u>icable:</u> OFFICE BOX) | 384 Faggart Avenue NW | <u>=</u> | |
| · · | | Concord, NC 28027 | D | |
| | | | | |
| | | | | |
| D. If amending the registered agent as new registered agent and/or the ne | | | me of the | |
| | CT CORPORATION | _ | | |
| Name of New Registered Agent | 1200 South Pine Island Ro | | | |
| | | · · · · · · · · · · · · · · · · · · · | | |
| | (Florida street address) Plantation | | 33324 | |
| New Registered Office Address: | 1 1411011011 | (City) | , Florida(Zip Code) | |
| | | ()/ | 147 44 47 | |
| | | | | |
| New Registered Agent's Signature, if o | hanging Registered Agent | <u>.</u> | | |
| I hereby accept the appointment as regist | tered agent. I am familiar | with and accept the obligation | is of the position. | |
| M A | <u>/</u> | | | |
| Low II | Donna Pe | terson-Riggs, Assistan | t Secretary | |
| | Signature of New P | Pagistared Agent if changing | | |

Check if applicable

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

Example:

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.

| 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> | <u>Addres</u> s |
| 1)Change | P | Jerry LSR Monts de Oca | 5017 N. Coolidge Ave |
| Add | | | Tampa, FL 33614 |
| X Remove | | | |
| 2) Change | P | Bryan Dauzat | 384 Faggart Avenue NW |
| X Add | | | Concord, NC 28027 |
| Remove 3) Change | VP | Dawain Desselle | 384 Faggart Avenue NW |
| X Add | | | Concord, NC 28027 |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | _ | |
| Add | | | |
| Remove | | | |
| 6)Change | | | |
| Add | | | |
| Remove | | | |

| | neels, if necessary). | (Be specific) | | | |
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| | | | nn ar concellation | of issued shares. | |
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| provisions for imp | provides for an exc plementing the amo ble, indicate N/A) | hange, reclassification endment if not contain the con | ined in the amend | lment itself: | |
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| provisions for imp | plementing the amo | hange, reclassification endment if not contain the con | ined in the amend | lment itself: | |

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| September 11, 2020 The date of each amendment(s) adoption: |
|--|
| Effective date if applicable: (no more than 90 days after amendment file date) |
| ino more man so adijs ejier americinem jue adies |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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 east for the amendment(s) was/were sufficient for approval |
| by |
| (votalis sioup) |
| September 14, 2020 |
| Dated |
| Signature The Signature |
| (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) |
| Dawain Desselle |
| (Typed or printed name of person signing) |
| Sr Vice President |
| (Title of person signing) |

the

thc