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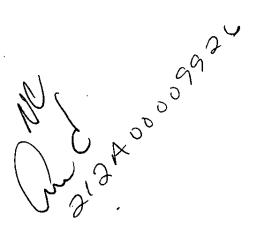
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: J & M EXCE	LLENT ŠABINET	TS CORP		
DOCUMENT NUMBER: P110001034			<del></del>	
The enclosed Articles of Amendment and fee are su	bmitted for f 'mg.			
Please return all correspondence concerning this mat	ter to the fol wing:			
JOS	E M HERNAI	NDEZ		
J & M E	Name of Contact Perso		•	
Firm/ Company 9044 NW 148TH STREET				
MIAMI LAKES, FL 33018				
	City/ State and Zip Cod	e	<u> </u>	
E-mail address: (to be us  For further information concerning this matter, pleas	ed for future annual report	notification)		
JOSE HERNANDEZ	at ( <b>786</b>	768-	5173	
Name of Contact Person		de & Daytime Teleph	one Number	
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:		
\$35 Filing Fee \$\times \text{Certificate of Status}\$	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Ference Certificate of State Certified Copy (Additional Copy is enclosed)	tus	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circlessee, FL 32301	e	

## Articles of Amendment to Articles of Incorporation

of

## J & M EXCELLENT CABINETS, CORP

(Name of Corporation as currently filed with the Florida Dept. of State) (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: JH KITCHEN CABINETS & CARPENTER, CORP 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 musticontain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address <u>MUST\_BE A STREET ADDRESS</u>) 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) New Registered Office Address: Florida 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.

Example: X Change	<u>PT</u>	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	
Change Add Remove	<u>.</u>	N/A			
2) Change Add Remove	<del></del>				
3) Change Add Remove					
4) Change Add Remove					
5) Change Add Remove		<del></del>	<del>,</del>		
6) Change Add Remove	· · · · · · · · · · · · · · · · · · ·				

If amending or adding additional Article (attach additional sheets, if necessary).	cies, enter change(s) here:
( anach udanional sneets, ij necessary).	(ве ѕресуіс)
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If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) a	Adoption: 3/13/2012
Effective date <u>if applicable</u> : 3/	13/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes case	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated03/	13/2012
select	precident or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court yed fiduciary by that fiduciary)
	JOSE M HERNANDEZ
	(Typed or printed name of person signing)
	PRESIDENT
τ	(Title of person signing)