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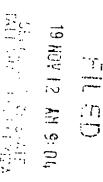
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Doe Way Wall Systems, Inc
DOCUMENT NUMBER: PIIOODIO9354
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lance Peeper Name of Contact Person Doe Way Wall Systems, Inc Firm/Company Address Sanford FL 32771 City/State and Zip Code Demail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (4DT) (283 - 1(0.13) Area Code & Daytime Telephone Number
Enclosed is a cheek for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curr	ently filed with the Florida Dept. of	<u>State</u>)		
(Document Numb	per of Corporation (if known)	<u> </u>		
rsuant to the provisions of section 607,1006, Florida Statutes, Articles of Incorporation:	this Florida Profit Corporation adopts	the followin	g ameno	iment(s
If amending name, enter the new name of the corporation	<u>u</u>			
me must be distinguishable and contain the word "corpor 'orp.," "Inc.," or Co.," or the designation "Corp." "Inc," rd "chartered," "professional association," or the abbreviati	or "Co". A professional corporation	l" or the at name must c	_The n bbreviat contain	lion
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u>)				•••
				_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				_
		- F. C.	15	-
If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	nddress in Florida, enter the name of ress:	the S	<u> </u>	i ;
Name of New Registered Agent		<u> </u>	200 2300 UMS	(T)
(Florida New Registered Office Address:	a street address) Flor	Siri Sida	10:	
	(City)	(Zip C	ode)	_

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.

X Change	<u>PT _ J</u>	<u>ohn Doe</u>		
X Remove	<u>V</u> <u>N</u>	dike Jones		
<u>X</u> Add	<u>SV</u> <u>S</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	\
1) Change	V.7	Katherine Peeper	732 Monroe Har	コン 10
X Add		4	Jahtor 12321	13
Remove				
2) Change				
Add				
Remove				
3) Change			2	
Add			19	
Remove				f;
4) Change			2 2	Ti D
Add			10.00	
Remove			<u> </u>	
5) Change				
Add				
Remove				
6)Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here:		
(Attach additional sheets, if necessary). (Be specific)		
NIA		
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	•	ו כיו
E. Har amondment around a for an arabana realization or annualistic of igned shares	•	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		•
(if not applicable, indicate N/A)		Ö,
	흡	<u></u>
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l		
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		 -

The date of each amendment(s) adoption:	, if	other t	han the
Effective date <u>if applicable</u> : (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 document's effective date on the Department of State's records.	l not b	oe listec	l as the
Adoption of Amendment(s) (CHECK ONE)			
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 (voting group)			
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.			
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.			
Dated			
Signature :	<u>: : : : : : : : : : : : : : : : : : : </u>	191	
Hy 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)		2	
Lance Peeper	_ 	gra 1	1,1
(Typed or printed name of person ligning)	ξ.	ë	(C)
tresident	<u>:-</u>	1	
(Title of person signing)			