P12000007053

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	MATION.	I INDUSTRIES I	NC
DOCUMENT NUM	_{IBER:} P1200000705	3	
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	C.L. AYLSWORT	- Н	
		Name of Contact Persor	1
	LOUMANN INDU		FEI#27-105574
		Firm/ Company	
	4195 TAMIAMI T	RAIL S. #169	
		Address	
	VENICE, FL 342	293	
		City/ State and Zip Code	e
CI		NA	
<u></u>	NTOMY@AOL.CO	Sed for future annual report	notification)
	E-man address: (to be us	sed for future annual report	·
For further informati	on concerning this matter, pleas	se call:	
C.L. AYLSV	VORTH	at (941	, 706-5435
Name	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$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)
Ar Di P.	ailing Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

LOUMANN INDUSTRIES INC.			
(Name of Corporation as currently filed	l with the Florida Dept. of S	tate)	
P12000007053			
(Document Number of Co	orporation (if known)		
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	tatutes, this <i>Florida Profit Co</i>	prporation adopts the following	amendment(s) to
A. If amending name, enter the new name of the corp	oration:		
			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A professi		
B. Enter new principal office address, if applicable:		·	
(Principal office address MUST BE A STREET ADDR	ESS)	7	8
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Service Services	FILED T12 AHIO: 12
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent C.L. AYL		nter the name of the	
	MIAMI TRAIL S.	· · · · · · · · · · · · · · · · · · ·	
4193 17	(Florida street address)		
New Registered Office Address: VENICE	•	, Florida 34293	
New Registerea Office Address:	(City)	, Florida(Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a songtime of New			

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> <u>Joł</u>	<u>ın Doe</u>	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	SV Sal	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	<u>S</u>	C.L. AYLSWORTH	4195 TAMIAMI TRAIL S. VENICE, FL 34293
Add			SECRETARY
Remove			
2) Change	<u>D</u> .	KEVIN COMERFORD	4195 TAMIAMI TRAIL S VENICE, FL 34293
Add			REMOVE
X Remove			
3) Change	<u>P</u>	THOMAS RITZMANN	4195 TAMIAMI TRAIL S VENICE, FL 34293
X Add			ADD AS PRESIDENT
Remove			
4) Change	<u>+</u>	FEO I.D.#	27-1055749
X Add			
Remove			
5) Change			
Add		.	
Remove			
6) Change			
Add			
Remove			
			- · ·

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
N/F	7
`	
for amondment receives for an available	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
. ()	<u>/</u> ^
/ <i>U</i> /	(

The date of each amendment(s) adoption: 10/8/2012	
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were sul	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast t	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voling group)
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated 10-8-2	012
Signature By a di	irector, president or other officer – if directors or officers have not been
	1, by an incorporator – if in the hands of a receiver, trustee, or other court
appoint	ed fiduciary by that fiduciary)
	C.L. AYLSWORTH
•	(Typed or printed name of person signing)
	DIRECTOR
•	(Title of person signing)