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DIVISION OF CORPORATIONS

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Amend CCC (10) 3/12/12

COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations

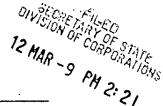
P.O. Box 6327 Tallahassee, FL 32314

AME OF CORPORATION: COMPLETE WHOLESQUE & SUPPLY, INC.			
OCUMENT NUMBER: <u>P12000515986</u>			
ne enclosed Articles of Amendment and fee are submitted for filing.			
ease return all correspondence concerning this matter to the following:			
Tanya Hagerty Name of Contact Person Complete Wholescale & Supply, Inc. Firm/Company 575 NW Mercanfile Place; Suffer IK Address Port Saint Lucte, FL 34986 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
or further information concerning this matter, please call:			
Name of Contact Reison at (772) 204-796 772-626-14 Area Code & Daytime Telephone Number	4)		
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Street Address Amendment Section			

Division of Corporations

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Complete in thoclesale & Spool	1. NOC "A S.
(Name of Corporation as currently filed with the	Florida Dept. of State)
P1200015986	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable; (Principal office address <u>MUST BE A STREET ADDRESS</u>)	975 LW Marcanthe Place; Ste. 114 Pat St. Locte FL 34986
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	575 DW Mercanlile Place; Ssite IH Port St. Whe FL 34986
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent 575 DW Merchanists	ercantre Piare Ste. 114 treet address)
New Registered Office Address: QCY-1 SCHY-1 (City)	Locke, Florida 34986
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	
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: XChange	<u>PT</u>	John Doe	,		
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s	:
1) Change Add Remove	4 // dec-2004 f a -	was an annual state of the stat	· · · · · · · · · · · · · · · · · · ·	***************************************	
2) Change Add Remove	*****		<u></u>		
3) Change Add Remove					
4) Change Add Remove					
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)
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)

The date of each amendment(s) adoptio	n: March 5,2012
Effective date if applicable:	March 5,2012
	(no more than 90 days after amendment file date) 🤾
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopted b by the shareholders was/were sufficien	by the shareholders. The number of votes cast for the amendment(s) at for approval.
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	e amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/were adopted by action was not required.	by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted b action was not required.	by the incorporators without shareholder action and shareholder
Dated CVC	n 5,200
(By a director selected, by a	r, president or other officer – if directors or officers have not been in incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)
	Tanya Hagerly
	(Typed or printed name of person signing)
**************************************	(Title of person signing)