P12000019436

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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DIVISMA OF CORPORATION

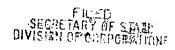
OCT 7 2015 C LEWIS

COVER LETTER **

TO: Amendment Section Division of Corporations

NAME OF CORPOR	KATION: K & B CARPENT	RY ENTERPRISE, INC.	
DOCUMENT NUME			
	of Amendment and fee are su	abmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
	LUIS A. BACALLAO		
	<u></u>	Name of Contact Perso	1
	K & B CARPENTRY ENTE	ERPRISE, INC.	
		Firm/ Company	
	609 KISMET PKWY EAST	• •	
		Address	
	CAPE CORAL, FL 33909		
•		City/ State and Zip Cod	e
TAXS	SERVICES2010@HOTMAII	COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	•
LUIS A. BACALLAC)	at (745-7247
Name o	f Contact Person	Area Co	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)
Ame Divis P.O.	ing Address Indirection Indire	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle

Articles of Amendment to Articles of Incorporation of



K & B CARPENTRY ENTERPRISE, INC.

15 OCT -5 AMII: 35

R&B CARPENTRT ENTERPRISE, II	NC.	
(<u>Name</u>	of Corporation as curr	ently filed with the Florida Dept. of State)
P12000019436		
	(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, t	this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation	<u>.</u>
N/A		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," c	ation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address,	if anulicable:	609 KISMET PKWY EAST
(Principal office address MUST BE A S		CAPE CORAL
		FL 33909
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		609 KISMET PKWY EAST
		CAPE CORAL
		FL 33909
D. If amending the registered agent ar new registered agent and/or the ne	nd/or registered office a w registered office addi	ddress in Florida, enter the name of the ress:
Name of New Registered Agent		
	609 KISMET PKWY I	EAST
	(Florida	ı street address)
New Registered Office Address:	CAPE CORAL	. Florida 33909
- 4 —		(City) (Zip Code)
New Registered Office Address: New Registered Agent's Signature, if c		(City) (Zip Code)
I hereby accept the appointment as regist	tered agent. I am famili	ar with and accept the obligations of the position.
		2)
	Signature of New	w 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			
1) Change	VP	PEDRO J. PRIETO	455 NE 2ND PL			
Add			CAPE CORAL			
X Remove			FL 33909			
2) Change	VP	ALVARO R. PEREZ	2800 NW 3RD STREET			
X Add			CAPE CORAL			
Remove			FL 33993			
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

	. (Be specific)				
	<u></u>				
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			<u> </u>		
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an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A) RES RECLASSIFICATION:	change, reclassif	Ication, or canc	ellation of issue amendment its	d shares, eff:	
RO J. PRIETO:0%		_			
'ARO R, PEREZ: 10%					
S A. BACALLAO: 90%					
S A. BACALLAO: 90%					
S A. BACALLAO: 90%					

	09/30/2015	10 -	
The date of each amendment(s)	adoption:		ther than the D
date this document was signed.	0/20/2016	SEGRE TARY TO DIVISION OF GUI	生為統
Effective date if applicable:	9/30/2015	BILLIDISH OF CHI	Pora (10)
	(no more than 90 days after amendment file date)	15 OCT -5 A	M11: 35
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, t Department of State's records.	his date will not be	listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amend sufficient for approval.	ment(s)	
	approved by the shareholders through voting groups. The following sofor each voting group entitled to vote separately on the amendment(s)		
	ast for the amendment(s) was/were sufficient for approval		
by	(voting group)		
	(voting group)		
action was not required.	adopted by the board of directors without shareholder action and shar		
L.J The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and sharehold	der	
09/30/20 Dated	015		
Signature			
(By a selection)	a director, president or other officer – if directors or officers have not cted, by an incorporator – if in the hands of a receiver, trustee, or othe binted fiduciary by that fiduciary)		
	LUIS A. BACALLAO		
	(Typed or printed name of person signing)		•
	PRESIDENT		
	(Title of person signing)		_