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Amend

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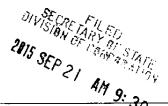
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CROSBY BUILDI	ERS AND DRY WALL IN	C
DOCUMENT NUMB	P12000021710		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
•	CLIFFORD CROSBY	·	
-	<u></u>	Name of Contact Person	1
	CROSBY BUILDERS AND	DRY WALL INC	
-		Firm/ Company	
	410 BLANDING BLVD. SU	ITE 419	
-		Address	
	ORANGE PARK, FLORIDA	32073	
-	,	City/ State and Zip Code	C
brothe	randsisteraccounting@gmail	.com	
		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
David Steinfeld		at (493-6481
Name o	f 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



CROSBY BUILDERS AND DRY WALL INC

(Name of Corporation as currently filed with the Florida Dept.	of State)

P12000021710	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporate "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:	410 BLANDING BLVD
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	SUITE 419
	ORANGE PARK, FLORIDA 32073
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	dress in Florida, enter the name of the ss:
N CN D	
(Florida s	street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia.	
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 D	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP		CLIFFORD PAUL CROSBY JR	4381 SADDLEHORN TRAIL
X Add		_		MIDDLEBURG, FLORIDA 32068
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

	ticles, enter change(s) here: . (Be specific)
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<u>ara 4</u>	
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f an amendment provides for an eve	change, reclassification, or cancellation of issued shares,
provisions for implementing the	nendment if not contained in the amendment itself:
provisions for implementing the am-	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	*** *** *** *** *** *** *** *** *** **
(if not applicable, indicate N/A)	

,	SEPTEMBER 17,2015	
The date of each amendment(s) a date this document was signed.	loption:	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	s date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment of the sproval.	ent(s)
	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	'ement
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareh	older
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholde	r
	ER 17, 2015	
DatedSignature	-1/h a +	
selecte	irector, president or other officer – if directors or officers have not be d, by an incorporator – if in the hands of a receiver, trustee, or other led fiduciary by that fiduciary)	een court
	CLIFFORD CROSBY	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	