P12000019080

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(Ac	ldress)	
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Amend 10 8/12/13

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: A & E HOME SUPPLY, INC. DOCUMENT NUMBER: P12000079080				
	of Amendment and fee are sub			
Please return all corres	spondence concerning this mat	ter to the following:		
	JOHN P MILLER			
	JOHN P MILLER	Name of Contact Person		
	10554 US HWY 1	Firm/ Company		
	BOCA RATON, F	Address L 33431		
		City/ State and Zip Code	;	
JPI	MCPAPA@BELLS		notification)	
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
JOHN P. MIL	LER	_{at (} 561	368-9777	
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check fo	Enclosed is a check for the following amount made payable to the Florida Department of State:			
■ \$35 Filing Fèe	☐\$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 Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

A & E HOME SUPPLY, INC.

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

P12000079080

ndment(s) to

(Documer	nt Number of Corporation (if know	vn)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Florid</i>	la Profit Corporation ac	lopts the following amendme
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co".	A professional corpora	
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			3 () () () () () () () () () (
D. If amending the registered agent an new registered agent and/or the new		Florida, enter the nan	
Name of New Registered Agent	2499 GLADES ROA	AD SHITE 304	
	(Florida street ad		
New Registered Office Address:	BOCA RATON		33431
<u>ivew Registerea Office Adaress:</u>	(City)	, Florida	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist			s of the position.

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>	Name	<u>Addres</u> s		
1) X Change	PT	ALICIA HERNANDEZ	10554 US HWY 1		
Add			PORT ST LUCIE, FL 34952		
Remove			·		
2) Change	VS	ELAINE FREEDMAN	10554 US HWY 1		
X	•		PORT ST LUCIE, FL 34952		
Remove					
3) Change					
Add					
Remove		•			
4) Change					
Add .					
Remove					
5) Change					
Add					
Remove					
6) Change					
6) Change Add					
Remove					

, uu	ing or adding addi dditional sheets, if n	ecessary).	es, enter chan (Be specific)	ge(s) here:		
				<u> </u>		
				-		
						· · ·
						
						
		_				
<u>If an amo</u>	endment provides ons for implementi	<u>for an excha</u> ng the ameno	nge, reclassifi Iment if not c	cation, or can ontained in th	<u>cellation of issu</u> e amendment it	<u>ed shares.</u> self:
(if n	not applicable, indic	cate N/A)				
		•				
		. <u></u>				

The date of each amendmen	nt(s) adoption: AUGUST 5TH, 2013	, if other than the
date this document was signe Effective date if applicable:	AUGUST 5TH 2013	
Effective date it applicable:	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):	
"The number of vot	es cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/w action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/w action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated_A	UGUST 5TH, 2013	
Signature	(By 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)	
	ALICIA HERNANDEZ	
	(Typed or printed name of person signing)	

PRESIDENT AND TREASURER
(Title of person signing)