P12000095547

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Amend

APR - 8 2014 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Diversific	ed Building De	partment MANAGEMENT	Corp
	BER: P1200009			'
The enclosed <i>Articles</i>	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	BUCK S. EVA	Name of Contact Person	n	
	112 For D	Firm/ Company	1-	
	223 East Bl Jupiter, Fl	Ay Cedar Circ Address 32U58	_16	
	Sopies L	City/ State and Zip Code	e	
<u></u>	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
		at ()	
Name of	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	r 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			Address Iment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Diversified Building Department (Name of Corporation as currently filed with the Fic	
P12 0000 955 47 (Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address if applicable: (Principal office address MUST BE A STREET ADDRESS)	242 SPOONBILL LANCE S JUPITER, FL 33458
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	242 SPOONBILL LAWES. JUPITER, FL 33458
D. If amending the registered agent and/or registered office address:	essin Florida, enter the name of the
(Florida stream) New Registered Office Address (City)	Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	36 AFF
Signature of New Registered Ag	gent, 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; TP= 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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add	<u>\\footnote{\rho}</u>	Lisa D. Alich	223 E. Bay Codar Circle Jupiter, FL 33458
Remove 2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change		·	
Remove			

	tional sheets, if ne	ecessary). (Be sp	ecific)		
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an amend	<u>iment provides fo</u>	or an exchange, renge the amendment	eclassification, o	r cancellation of is	ssued shares.
<u>orovisions</u>	for implementing	g the amendment	if not contained	in the amendmen	<u>t itself:</u>
(it not	applicable, indica	ate N/A)			
, ,					
			.		

date this document was signed.	, if other than the
Effective date if applicable: JANUARY 15T, 2014 (no more than 90 days after amendment file date)	
(no not out and out and	
Adaption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 3-24-14	
Dated S P S	
Signature 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)	
••	
Buck S. EVANS	
(Typed or printed name of person signing)	
Buck S. EVANS (Typed or printed name of person signing) Presiden+	
President (Title of person signing)	