P13000000817

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: JOHNNY'S WOOI	OWORKS CORP	
	BER: P13000000877		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	JOHNNY ZABALA GARCI	A	
		Name of Contact Person	1
	JOHNNY'S WOODWORKS	CORP	
		Firm/ Company	
	4837 ROCKVALE DRIVE		
		Address	
	KISSIMMEE FL 34758		
		City/ State and Zip Code	
	JZABALA19@HOTMAIL.C	COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas		516-2038
	of Contact Person	at (407	de & Daytime Telephone Number
Name	of Contact Person	Area Coo	ne & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment Articles of Incorporation of

JOHNNY'S WOODWORKS CORP

(Name of Corporation	on as currently	filed with the Florid	ia Dept. of State)	
P13000000877				
(Досип	ent Number of	Corporation (if know	(n)	
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	Statutes, this Fi	lorida Profit Corpord	ation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the co	rporation:			
				The new
name must he distinguishable and contain the word "co" Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre	or "Co". A			
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADL				
				765
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	X)			٠.٠
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			· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent and/or register new registered agent and/or the new registered		ss in Florida, enter	the name of the	ن ن
Name of New Registered Agent				•
	(Florida stree	et address)		_
New Registered Office Address:			, Florida	
	(0	City)	(Zi	ip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		ith and account the ob-	lipations of the position	
r nevery accept the appointment as registered agent.	ı um jummar wi	т ини иссері те оо	aganons of the position	1.
Sion	ature of New Res	gistered Agent, if cha	unging .	
J.g.n.		5.5.2.2.2.2.2.3.5.0.0.0	····o···*ō	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	P	JOHNNY ZABALA SR	4837 ROCKVALE DR		
Add			KISSIMMEE, FL 34758		
X Remove					
2) Change	P	XIOMARA GARCIA CRUZ	4837 ROCKVALE DR		
X Add			KISSIMMEE, FL 34758		
Remove 3) Change		<u></u>			
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

(Attach additional.	dding additional Articl sheets, if necessary).	(Be specific)	<u> </u>			
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E If an amandment	provides for an excha	nga raclassifical	tion or cancellat	ian of issued shar	oc.	
provisions for in	nplementing the amen	dment if not con	tained in the am	endment itself:	531	
(if not applic	able, indicate N/A)		-			
	- · · - ·					
		<u></u>				

- '	07/22/2020
The date of each amendment(s)	
date this document was signed.	
	22/2020
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ac action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	"
o,	(voting group)
DatedSignature	Nohmy Jakala
	prector, president of other officer – if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court
аррог	nted fiduciary by that fiduciary)
	JOHNNY ZABALA SR
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)