P13000033213

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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPO	RATION: QUICK FRAMING	GINC			
DOCUMENT NUM					
	of Amendment and fee are su	abmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	LUIS RAMIREZ				
		Name of Contact Person	1)		
	BEST FINANCIAL SERVICES & ASSOCIATES INC				
		Firm/ Company			
	8800 UNIVERSITY PKWY				
		Address	-		
	PENSACOLA FL 32514				
		City/ State and Zip Cod	· ·		
LUIS	@BESTFINANCIALSERVI	CES.COM			
	_	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
LUIS RAMIREZ		at (<u>850</u>	572-6846		
Name	of Contact Person	Area Code & Daytime Telephone Num			
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:		
S35 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)		
Mailing Address		Street	Address		
	endment Section	Aniendment Section			
Division of Corporations		Division of Corporations			
	. Box 6327 ahassee: FL 32314		Clitton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

QUICK FRAMING INC (Name of Corporation as currently filed with the Florida Dept. of State) P13000033213 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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 - Treusurer; 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 Doc 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 Dog				
X Remove	$\underline{\mathbf{V}}$	Mike Jones				
<u>X</u> Add	<u>SV</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change	VP	ROSA E. CASTILLO RANGEI	. 616 SHOEMAKER ST			
X Add			PENSACOLA FL 32505			
Remove						
2) Change						
Add						
Remove						
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change		_				
Add						
Remove						
6) Change						
Add						
Remove						

If amending or adding addit Attach additional sheets, if ne					
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		<u> </u>			
f an amendment provides fo	or an exchange, rech	assification, or ca	ncellation of issue	d shares,	
provisions for implementing (if not applicable, indica	g the amendment [[]] ite N/A]	<u>aot contained in t</u>	ne amengment its	<u>eir:</u>	
		- -			

•	9/21/2018	
The date of each amendment(s) addate this document was signed.	loption:	, if other than the
9/21	/2018	
Effective date <u>if applicable</u> :	(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 dat	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) fficient for approval.)
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	г
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
9/21/2018 Dated		
Signature	Pade Laurelo	
(By a d selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)	
	Pedro Soucedo VATYON	
	(Typed or printed name of person signing)	<u> </u>
	Posesidant	
	(Title of person signing)	