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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: JMO CARPENTR	Y, INC			
DOCUMENT NUMB	ER: P13000052243				
	f Amendment and fee are su	abmitted for filing.			
Please return all corresp	ondence concerning this ma	itter to the following:			
,	ANDRES ONOFRE				
<del>-</del>		Name of Contact Person	1		
_		Firm/ Company			
-	2462 PINEWAY DRIVE				
	Address				
,	WEST PALM BEACH.FL 33415				
-		City/ State and Zip Cod	e		
For further information	E-mail address: (to be u	sed for future annual report se call:	notification)		
ANDRES ONOFRE		at (	318-5122		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 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 Intent Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

JMO CARPENTRY INC

(Name of Corporation a	as currently	filed with the Florida	Dept, of State)	
13000052243				
(Document	i Number of C	Corporation (if known)		
ursuant to the provisions of section 607,1006, Florida Sta s Articles of Incorporation:	atutes, this Fl	orida Profit Corporatio	on adopts the follo	owing amendment(s
. If amending name, enter the new name of the corpo	oration:			
ame must be distinguishable and contain the word ". Corp.," "Inc.," or Co.," or the designation "Corp," " ord "chartered," "professional association," or the abb	"Inc." or "Ce	" A professional cor	orporated" or to poration name n	The new he abbreviation just contain the
<ul> <li>Enter new principal office address, if applicable:</li> </ul>	reviation 1°,	л.		
Principal office address <u>MUST BE A STREET ADDRE</u>	<u>(S.S.</u> )			
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
If amending the registered agent and/or registered onew registered agent and/or the new registered office		s in Florida, enter the	name of the	
Name of New Registered Agent				
	(Florida street	address)		
New Registered Office Address:			, Florida	
	(C	ity)	<b>亚</b> 亚(	Zip Codes
				3
			सारी. केल	
w Registered Agent's Signature, if changing Register wereby accept the appointment as registered agent, I am	<u>red Agent:</u> n familiar wit:	h and accept the obliga	६०२- tions of मिले bositi	700. 注 <sup>一元</sup>
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·		ייי די
			<b>温</b> 湯。"	D : ( )
_			£i" ↓	ي تورد کا
Signature	e of New Reg	istered Agent, if changi	ng 👯 O	<u>n</u>

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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
L) Change	VP	JOSE M ONOFRE MARTINEZ	2462 PINEWAY DR
X Add			WEST PALM BEACH, FL 33415
Remove			
2) Change	<u>s</u>	MARIA C MORAN GONZALEZ	2462 PINEWAY DRIVE
XAdd			WEST PALM BEACH, FL 33415
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			- <u></u>
5) Change			
Add			
Remove			
6) Change			
Add			
Pamora			

. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)
	·
***	
	<del></del>
15	Annual of Continue
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amondment itself:
(if not applicable, indicate N/A)	
/A	
	-

5/20/17	
	, if other than the
date this document was signed.	
5/20/2017	
Effective date if applicable: (no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes east 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)	
<ul> <li>□ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.</li> <li>□ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.</li> </ul>	
5/20/17 Dated	_
(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)	
ANDRES ONOFRE	
(Typed or printed name of person signing)	<del></del>
President	
(Title of person signing)	<del></del>