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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: COVENANT WO	ODWORK & CABINETR'	Y, INC.		
DOCUMENT NUMB					
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
•	GUY SPERDUTO				
•	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1		
	GUY D. SPERDUTO CPA, PA				
-	The same of the sa	Firm/ Company			
	8963 STIRLING ROAD SUITE 101				
•		Address	-		
	COOPER CITY, FL 33328				
-		City/ State and Zip Code	;		
EBRI	NSLEY@YAHOO.COM				
	-	ed for future annual report	notification)		
	`	*			
For further information	concerning this matter, pleas	e call:			
GUY SPERDUTO		at (432-0272		
Name of Contact Person		Area Coo	le & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment 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)		
Ame Divis P.O.	ing Address ndment Section tion of Corporations Box 6327 hassee, 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 of

COVENANT WOODWORK & CABINET	IRI, INC.	·······	
(Name of	Corporation as currently filed with the Florida Dep	t. of State)	
P13000072214			
	(Document Number of Corporation (if known)		<u> </u>
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this <i>Florida Profit Corporation</i> ac	dopts the following a	mendment(s) to
A. If amending name, enter the new nam	e of the corporation:		
		au	he new
	in the word "corporation," "company," or "incorpo ion "Corp," "Inc," or "Co". A professional corpor on," or the abbreviation "P.A."	orated" or the abbi	reviation
B. Enter new principal office address, if (Principal office address MUST BE A STR	applicable: REET ADDRESS)		
C. Enter new mailing address, if applica	shle		
(Mailing address MAY BE A POST OF			
			
	or registered office address in Florida, enter the na	me of the	
new registered agent and/or the new	registered office address:		
Name of New Registered Agent			
-	(Florida street address)		
New Registered Office Address:		. Florida	
New Registered Office Hadridge.	(City)	(Zip Co	de)
New Registered Agent's Signature, if cha	anging Registered Agent	5	
	red agent. I am familiar with and accept the obligation		
		3.7 S	77
		10 to	promise promise
	Cignostuna of Nana Pacintonal Agent if abouting		Sandran S
	Signature of New Registered Agent, if changing	To (j į j Prombas
		\$7.7 6	آلمهديب
		80	

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>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	JOSHUA BRINSLEY	17980 NW 2ND CT
X Add			MIAMI, FL 33169
Remove			
2) Change	<u></u>		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			*****
Remove			
5) Change		_	
Add			
Remove			
6) Change		·	
Add			•
Remove			

amending or adding additional Author additional Author additional sheets, if necessary)	(Be specific)			
 				
				
			····	
		, , , , , , , , , , , , , , , , , , , 		
an amendment provides for an ex- rovisions for implementing the an	hange, reclassification,	or cancellation of iss	sued shares.	
rovisions for implementing the an (if not applicable, indicate N/A)	<u>endment if not containe</u>	d in the amendment	itself:	
(ij noi applicaole, inalcale N/A)				
				
				······································

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	ite will not be listed as the
Adoption 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.	s)
☐ 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):	ent
"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 shareholde action was not required.	эг
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
AUGUST 26, 2016 Dated	
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 courappointed fiduciary by that fiduciary)	
EDWARD BRINSLEY	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	