# P14000021974

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	<del>(</del> )
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	)
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only



900260143259

05/13/14--01004--015 \*\*35.00

DEPARTMENT OF STATE

14 MAY 13 PH 12: 0

und

MAY 13 2014 T. CARTER

## CORPORATE ACCESS,

### \*When you need ACCESS to the world \*\*\*\*

INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

I		7	WALK IN		
	PIC	CK UP:	5/13 Glinda	·	
	CERTIFIED COPY				
xx	РНОТОСОРУ				· · · · · · · · · · · · · · · · · · ·
	CUS				
хх	FILING	Ame	nd		
1.	CAMPBELL EXTERIOR INC.				
	(CORPORATE NAME AND DOO	CUMENT #)			
2.	(CORPORATE NAME AND DOG	CUMENT#)			
0					
3.	(CORPORATE NAME AND DOO	CUMENT #)			
4.					
	(CORPORATE NAME AND DOO	CUMENT #)			
<i>5</i> .	(CORPORATE NAME AND DOG	CHMENT#)			
		0.0			
6.	(CORPORATE NAME AND DO	CUMENT #)			
SPECIA	L INSTRUCTIONS:				
	<del></del>				

### COVER LETTER

Division of Corporations	
NAME OF CORPORATION: Campbell E	Exterior inc.
DOCUMENT NUMBER:	1
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this mat	tter to the following:
Justin A Campbe	li :
	Name of Contact Person
Campbell Exterio	
	Firm/ Company
118 Whispering F	Pine dr.
	Address
Palm Coast FL 32	2164
	City/ State and Zip Code
campbellexterior@ya	shoo com
	sed for future annual report notification)
5 mai 6-5 tim (10 50 ac	ior is a simulative port normality
For further information concerning this matter, pleas	se call:
Justin A Campbell	386264±1201
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
\$35 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation

14 HAY 13 PM 12: 08

of Campbell Exterior inc. (Name of Corporation as currently filed with the Florida Dept. of State) P14000021974 (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: Florida (Zip Code) (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. 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.

X Change	PT Joh	nn Doe	•
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	VP	Ronald Johson	17 A- Breylen
X Add			Palm Coast FL
Remove			32137
2) Change	<del></del>		·
Add			
Remove			
3 ) Change			
Add			
Remove			<del>,                                      </del>
4) Change			- <u> </u>
Add			
Remove			
5) Change		44	
Add			<del></del>
Remove			
6) Change	<u> </u>		
Add			
Remove			

amending or adding additional Arti tach additional sheets, if necessary).	(Be specific	)			
		<del></del>			
		<del></del>			
	<del></del>	······································			
	<u> </u>				
		<del></del>	<del></del>		<del></del>
an amendment provides for an exc	hange, reclas	sification, or	cancellation of	issued shares,	
rovisions for implementing the am (if not applicable, indicate N/A)	endment if n	ot contained i	n the amendm	ent itself:	
(if not applicante, maicule (i.x.)					

The date of each amendment(s) a	doption:				
Effective date if applicable: 05/13/2014		1			
	(no more than 90 days after c	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)	1			
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of vufficient for approval.	otes cast for the amendment(s)			
	proved by the shareholders through voting greath voting group entitled to vote separate				
"The number of votes cas	t for the amendment(s) was/were sufficient for	or approval			
by	(voting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	(voting group)				
action was not required.	lopted by the board of directors without share	,			
The amendment(s) was/were action was not required.	lopted by the incorporators without sharehold	der action and shareholder			
Dated 05/13	1/2014	: 			
Signature	the state of the s				
select	director, president or other officer - if direct ed, by an incorporator - if in the hands of a model fiduciary by that fiduciary)				
	Justin A. Campbell	,			
	(Typed or printed name of pers	on signing)			
	President				
•	(Title of person signing)				

j