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SECRETARY OF STATE

AUG 3 0 ZO18 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: RE THE CARPE	NTER, INC		
DOCUMENT NUM	BER: P14000038505			
	s of Amendment and fee are su	bmitted for fil	ing.	
Please return all corre	espondence concerning this ma	tter to the follo	owing:	
	ROBERT F COHEN CPA			
		Name of C	ontact Person	n
	ROBERT F COHEN CPA			
		Firm/	Company	-
	2918 BUSCH LAKE BLVD		• •	
			dress	
	TAMPA, FL 33614			
		City/ State	and Zip Cod	e e
ROE	B@ROBERTFCOHENCPA.	СОМ		
	E-mail address: (to be us		nnual report	notification)
For further information	on concerning this matter, pleas	se call:		
ROBERT F COHE	N	at	813	932-7415
Name		Area Co	de & Daytime Telephone Number	
Enclosed is a check f	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 Fi Certified (Addition: enclosed)	Copy al copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Bux 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 of

RE THE CARPENTER, INC.

(Name of Corporation as currently file	d with the Florida Dept. of State)
P14000038505	Torna Dept. of State)
(Document Number of Corp	oration (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida</i> Articles of Incorporation:	da Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," " "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co", word "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	5.65 a
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FILED WE 29 AM 8: 11 ANIASSEE, FLORIDA
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the
Name of New Registered Agent	
(Florida street ad	lane)
New Registered Office Address: (City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar with a	ad accept the obligations of the position
	is accept the vinigations of the position.
Signature of New Registe	red 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	RAFAEL R ESPINOSA	7009 INTERBAY BLVD APT #307
X Add			TAMPA, FL 33616
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	dding additional Art sheets, if necessary).	(Be specific)			
					
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rovisions for in	provides for an exclude uplementing the ame	ndment if not cont:	<u>on, or cancellatio</u> lined in the amen	n 01 issued snare dment itself:	<u>s,</u>
(if not applic	cable, indicate N/A)				
					-

					<u>-</u>
					

The date of each amendment(s) adoption date this document was signed.	n:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block d document's effective date on the Departme	oes not meet the applicable statutory filing requirements ent of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficien	y the shareholders. The number of votes east for the ame t for approval.	ndment(s)
☐ The amendment(s) was/were approved must be separately provided for each v	by the shareholders through voting groups. The following ording group entitled to vote separately on the amendmen	g statement t(s):
"The number of votes east for the	amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted b action was not required.	y the board of directors without shareholder action and sh	areholder
action was not required.	y the incorporators without shareholder action and shareh	older
DatedSignature	27/18	
(By a director, selected, by a	president or other officer – if directors or officers have no incorporator – if in the hands of a receiver, trustee, or officery by that fiduciary)	not been ther court
RAFA	EL ESPINOZA	
	(Typed or printed name of person signing)	
PRES	SIDENT	
	(Title of person signing)	

. . . .