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DIVISION OF CORPORATIONS.

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### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: AB HOME IMPROVEMENT, INC					
DOCUMENT NUMBER:					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
ANTONIO A BOU					
		Name of Contact Person	1		
	AB HOME IMPROVEMENT, INC				
		Firm/ Company			
	1224 E RIVER DR				
		Address			
	MARGATE, FL 3	3063			
		City/ State and Zip Code	25		
A N I	TANIADALISAAS	AVALIOO EC			
AN	TONIOBOU2003				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, please call:					
	, , , , , , , , , , , , , , , , , , ,				
ANTONIO BOU		<sub>at (</sub> 954	464-7745		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filling Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		Street Address			
Amendment Section		Amendment Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Clifton Building					
Tollahacces El 32214		2661 Evacutiva Center Circle			

Tallahassee, FL 32301



#### Articles of Amendment to Articles of Incorporation of



## AB HOME IMPROVEMENT, INC

15 APR 16 AM 10: 54

(Name of Corporation as currently filed with the FI	lorida Dept. of State)
(Document Number of Corporation (if	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
AB FINISH CARPENTRY, INC	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation Co". 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> )	
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: new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	eet address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w	t with and accept the obligations of the position.
Signature of New Registered A	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	PT	John Do	<u>oc</u>	
X Remove	· <b>Y</b>	Mike Jo	nes	
<u>-X</u> Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
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Remove		,		
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Add				
Remove				Valleting the Manual and American Section (1997)
6) Change				
Add				
Remove				- 11,000 - 10,000

	(Be specific)
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The state of the s	***************************************
If an amendment provides for an excha	inge, reclassification, or cancellation of issued shares,
If an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A)	inge, reclassification, or cancellation of issued shares, durent if not contained in the amendment itself:
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provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:

The date of each amendment(s)	adoption:	SEURE FAR	<u>, při díře na proce</u>	, if other than the
date this document was signed.	•	DIA 12:00 0 - 1	omin a sandas	
Effective date if applicable:	,	15 APR 16	AM 10: 54	
Management.	(no more than	n 90 days after <mark>amendment fi</mark> le		manufacture.
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were a by the shareholders was/were		the number of votes cast for the	ne amendment(s)	
The amendment(s) was/were a must be separately provided for	pproved by the shareholders to or each voting group entitled	hrough voting groups. The fo to vote separately on the ame	llowing statement ndment(s):	
"The number of votes ca	st for the amendment(s) was/v	were sufficient for approval		
by		31		
	(voting group)			
The amendment(s) was/were a action was not required.  The amendment(s) was/were a				
action was not required.				
Dated 04/10/	2015			
Signature	ASIM .			
		fficer - if directors or officers		
	ted, by an incorporator – if in inted fiduciary by that fiducia	the hands of a receiver, truste	ee, or other court	
арро	inted fiduciary by Biat fiducia	uy)		
	ANTONIO A BOU			
	(Typed o	or printed name of person sign	ing)	
	PRESIDENT			
	(	(Title of person signing)	de la	and the first first first