## P14000059938

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## COVER LETTER

NAME OF CORPORATION: S&S Drywall and Framing, Inc.  DOCUMENT NUMBER: P14000059938  The enclosed Articles of Amendment and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  Richard Lesko  Name of Contact Person					
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Richard Lesko Name of Contact Person					
St S Dryuali and Francing, hC. Firm/Company					
Firm/ Company					
1433 Gulf to Bay BIVd #F					
Clearwater, R 33755					
City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
in the state of th					
For further information concerning this matter, please call:					
729					
Richard Lesko at 851-3657					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status  \$\begin{array}{c} \Bar{43.75} \text{ Filing Fee & Certified Copy (Additional copy is enclosed)} \Bar{252.50} \text{ Filing Fee & Certified Copy (Additional Copy is enclosed)} \end{array}\$					
Mailing Address Amendment Section  Street Address Amendment Section					

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation of

FILEU SECRETARY OF STATE DIVISION OF CORPORATION

StS DMWa	11 and Framu	19, Inc	2816 AUG 10 PM 1: 42
(Name o	Corporation as currently fi	led with the Florida De	pt. of State)
Plu	1000059938		
	(Document Number of Co	rporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Flo	rida Profit Corporation :	adopts the following amendment(s) t
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associate	ition "Corp," "Inc," or "Co	". A professional corpo	
B. Enter new principal office address, i (Principal office address MUST BE A ST		<del>,</del>	
(1 incipal office dudiess most BE ASI	<u> </u>		
	_		
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O			
D. If amending the registered agent and new registered agent and/or the new		in Florida, enter the na	ame of the
Name of New Registered Agent			
	(Florida street o	nddress)	<del></del>
New Registered Office Address:			, Florida
	(Cit	y)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		and accept the obligatio	ons 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.

Example: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	VP Daniel Guido	1433 Gulfto Bag, Bu
_X_ Add		#
Remove		Clearwater, FL 33755
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		<del></del>
Remove		
6) Change		<del></del>
Add		
Remove		

•	(Be specific)
<del> </del>	
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	1
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an

The date of each amendment(s) a	doption:		if other than the
date this document was signed.			SECRETARY OF STATE OF
Effective date <u>if applicable</u> :			MAISING OF A
	(no more than 90 days afte	r amendment file date)	2016 AUG 10 PH 1: 42
Note: If the date inserted in this document's effective date on the D	plock does not meet the applicable statut epartment of State's records.	ory filing requirements,	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of afficient for approval.	f votes cast for the amen	dment(s)
	proved by the shareholders through voting each voting group entitled to vote separa		
"The number of votes cas	for the amendment(s) was/were sufficient	t for approval	
by	(voting group)	<del>, , , , , , , , , , , , , , , , , , , </del>	
•	(voting group)		
The amendment(s) was/were ad action was not required.	opted by the board of directors without sh	areholder action and sha	nreholder
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareho	older action and shareho	older
Dated 6 7	016		
	ham Doll		
Signatury V	director, president or other officer – if dire	ectors or officers have no	ot been
	d, by an incorporator – if in the hands of	a receiver, trustee, or ot	ner court
appoin	ated fiduciary by that fiduciary)		
	Shannon Lesko		
	(Typed or printed name of pe	rson signing)	
	Clerk	5C	_
	(Title of person s	ionino)	