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### Florida Department of State

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(((H14000294709 3)))



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From:

Account Name : SALVATORI, WOOD, BUCKEL, CARMICHAEL & LOTTES

Account Number : I20030000112

: (239)552-4100

Phone Fax Number

: (239) 649-0158

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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#### COR AMND/RESTATE/CORRECT OR O/D RESIGN UNIIK WOOD COMPANY

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## (((H14000294709 3)))

#### **COVER LETTER**

TO: Amendment Sect Division of Corp			. ,			
NAME OF COPPO	RATION: Uniik Wood	l Company				
	BER: P1400008097					
	of Amendment and fee are sa					
Please return all corre	spundence concerning this ma	tter to the following:				
	Gary K. Wilson					
		Name of Cuntact Person	n			
	Salvatori, Wood, Buckel, Carmichael & Lottes					
	Firm/ Company					
	9132 Strada Place, Fourth Floor					
		Address				
	Naples, FL 3410	3				
		City/ State and Zip Cod	Ľ			
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For further information concerning this matter, please call:						
Gary K. Wilson at 239 , 552-4100						
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			•			
Enclosed is a check for the following amount made payable to the Florida Department of State:						
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Mailing Address			Address			
Amendment Section Division of Corporations		Amendment Section Division of Corporations				
P.O. Box 6327		Clifton Building				
Taliahassee, FL 32314		2661 Executive Center Circle Tollahussee, FL 32301				

01:34:38 p.m. 12-22-2014 (((H14000294709 3))) Articles of Amendment Articles of Incorporation Uniik Wood Company (Name of Corporation as currently filed with the Florida Dept. of State) P14000080972 (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 cornoration: Unique Wood Company 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 RE A STREET ADDRESS) C. Enter new malling 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 paine of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street oddress) New Registered Office Address: Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent:

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I hereby accept the appointment as registered agent, I am familiar with amil accept the obligations of the position.

Signature of New Registered Agent, if changing

4/6

If smeading 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 = Vico President; V = 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, 1' as Remove, and Sally Smith, SV as an Add.

X Chunge	PT	John Doe		
X Remove	¥	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name		Address
1) Change		-	<del></del>	
Add		,		
Remove				
2) Change				<del></del>
Add				· · · · · · · · · · · · · · · · · · ·
Remove				
3) Cliange				
Add				
ilemove				
4) Chunge		•		
Add				
Remove				
5) Change				
Add			<del></del>	
Rensove				
6) Change	-	<del></del>		
Add			•	
Remove				

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If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	<u></u>
	•
	,
If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N'A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	<u> </u>

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# (((H14000294709 3)))

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	<del>-</del>
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be reparately provided for each voting group entitled to vote separately on the amendment(s):	
"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 shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated December 22, 2014	
Signature MMV att	
(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 court appointed fiduciary by that fiduciary)	
Steve Karterouliotis	
(Typed or printed name of person signing)	
President	
(Title of person signing)	