P15000015685

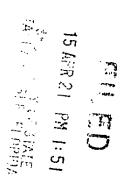
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	Minor to	Major Qualit	y Restorations I	Inc.	
DOCUMENT NUMBER	R: <u>P15000015</u>	685		in a	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			5 APR
Please return all correspondence concerning this mat		tter to the following:			22
	William Ray Minor to M	Name of Contact Person Ayor Quality Firm/Company	S Restorations	Together Street	PH 1:51
	12010 SE 18	23 AUC. Address			
_	Ocklawaho	City/ State and Zip Code	e		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information e	oncerning this matter, pleas	se call:			
William Name of	Chols Contact Person	at (352 Area Co	<u>502 - 040 9</u> de & Daytime Telephone Nur	nber	
Enclosed is a check for the	e following amount made	payable to the Florida Depa	artment of State:		
S \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amend Divisio P.O. Be	ment Section n of Corporations ox 6327 ussee, FL 32314	Amend Divisio Clifton	Actoress Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation 5000015685 (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." Compensation of the particle for the particle of the particle (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: ON TOUR OF SHEET OF STATE OF STATEMENT OF ST 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 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)

Name pain his alligaria regime tille by two first letter of the attion like:

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 neid. President, Treasurer, Director would be PVD.

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, Pally Smith, Pally Smith, PA as an Kas.

Example: X Change	<u>PT</u>	John Doe	
X Reta ove	<u>Y</u>	<u> </u>	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Keith of Flechas	12010 SE 123 AVE.
Add			Ocklawaha, Fl. 32179
Remove			
2) Change	D	Richard K Nichols	12010 SE 123 AVE
Add			Orkhusha, Ft. 32179
Remove	~	•	
3) Change	<u>7</u>	William R Nichols	12010 SE 123 Ave.
Add			Ocklawaha, Fl. 32179
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
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an amendment provides for an exc	hange, reclassification, or cancellation of issued shares.
an amendment provides for an exc rovisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
in 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:
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The date of each amendment(s) adoption: 4-14-2015	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	_
(no more than 90 days after amenament file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 separately 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)	
(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 4-15-14	
Signature William R. Michals	
(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)	
appointed inductary by that inductary)	
(Typed or printed name of person signing)	···
(Typed or printed name of person signing)	
President	
(Title of person signing)	