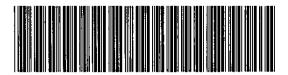
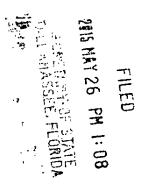
| (Re                                     | questor's Name)    |             |  |  |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO  | RATION: Capstone Renovati                   | on, Inc  |   |
|--|---|--|---|
| DOCUMENT NUM   |   |  |   |
|  | of Amendment and fee are su                 | bmitted for filing.  |   |
| Please return all corre  | spondence concerning this ma                | tter to the following:   |   |
|  | Marsha Flaige                               |  |   |
|  |   | Name of Contact Persor   | 1   |
|  | Marsha Flaige, CPA                          |  |   |
|  |   | Firm/ Company  |   |
|  | 4631 Brown Ave                              |  |   |
|  |   | Address  |   |
|  | Jacksonville, FL 32207                      |  |   |
|  |   | City/ State and Zip Code   | C   |
| flaige   | em@bellsouth.net                            |  |   |
|  | E-mail address: (to be us                   | sed for future annual report                                       | notification)   |
| For further information  | on concerning this matter, please           | se call:   |   |
| Colin Harsch   |   | at ( 904   | de & Daytime Telephone Number   |
| Name   | of Contact Person                           | Area Co  | de & Daytime Telephone Number   |
| Enclosed is a check for  | or the following amount made                | payable to the Florida Depa  | artment of State:   |
| ■ \$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) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |   | Amend<br>Divisio<br>Clifton  | Address Iment Section on of Corporations Building executive Center Circle             |

Tallahassee, FL 32301



May 14, 2015

Marsha Flaige Marsha Flaige, CPA 4631 Brown Ave. Jacksonville, FL 32207

SUBJECT: CAPSTONE RENOVATION, INC.

Ref. Number: P15000021171

We have received your document for CAPSTONE RENOVATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P13000101213.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 915A00010154



## Articles of Amendment to Articles of Incorporation of

FILED

2015 MAY 26 PM 1:08 Capstone Renovation, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P15000021171 (Document Number of Corporation (if known) D. WINE 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: Construction and Investment, 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 BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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 (City) (Zip Code) 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)

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                      | <u>v</u>  | Mike Jones  |                 |
| X Add                         | <u>sv</u> | Sally Smith |                 |
| Type of Action<br>(Check One) | Title     | <u>Name</u> | <u>Addres</u> s |
| 1) Change                     |           | N/A         |                 |
| Add                           |           |             |                 |
| Remove                        |           |             | <del></del>     |
| 2) Change                     |           | _           |                 |
| Add                           |           |             |                 |
| Remove                        |           |             |                 |
| 3 ) Change                    |           |             | _               |
| Add                           |           |             | <del> </del>    |
| Remove                        |           |             |                 |
| 4) Change                     |           |             |                 |
| Add                           |           |             |                 |
| Remove                        |           |             |                 |
| 5) Change                     |           |             |                 |
| Add                           | <u> </u>  |             | <u> </u>        |
| Remove                        |           |             |                 |
|                               |           |             |                 |
| 6) Change                     |           |             |                 |
| Add                           |           |             |                 |
| Remove                        |           |             |                 |

| E. If amending or adding additional Arti<br>(Attach additional sheets, if necessary).  | cles, enter change(s) here: (Re specific)                 |
|--|---|
| N/A  | (Do specific)   |
|  |   |
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| F. If an amendment provides for an exch  | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame<br>(if not applicable, indicate N/A)   | ndment if not contained in the amendment itself:          |
| N/A  |   |
|  |   |
| <del></del>  |   |
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| The date of each amendment(s) adoption:, if other than the   |
|--|
| date this document was signed.   |
| N/A  |
| Effective date if applicable:  |
| (no more than 90 days after amendment file date)   |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.   |
| Adoption of Amendment(s) ( <u>CHECK ONE</u> )  |
| ☐ 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)   |
| <ul> <li>■ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.</li> <li>□ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder</li> </ul>   |
| action was not required.   |
| 5/1/2015<br>Dated/ /   |
| $\Omega I I I$   |
| Signature A Comment of |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court  |
| appointed fiduciary by that fiduciary  |
|  |
| James R. Heffernan   |
| (Typed or printed name of person signing)  |
| President  |
| (Title of person signing)  |