P15000022274

(Re	questor's Name)	
(Ad	dress)	.
(Ād	dress)	
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	(C) C C)	45
(Cit	y/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name	e)
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	cument Number)	
, CO	cument (valiber)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LEGEND CUSTO	M HOMES, INC	
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Sheneal Simmons		
		Name of Contact Persor	1
	United Agent Services		
		Firm/ Company	
	221 N Broad St		
		Address	
	Middletown, DE 19709		
		City/ State and Zip Code	2
	compliance@unitedagentserv	vices.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call: at (302	894-7717
	of Contact Person	at (<u>*</u> Area Coe)de & Daytime Telephone Number
	r the following amount made		
S35 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)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 Y	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, F1, 32303

Articles of Amendment to Articles of Incorporation of

LEGEND CUSTOM HOMES, INC.

LEGEND COSTOM HOMES, INC				
(<u>Name of Corporation as cu</u>	rrently filed with the Florid	a Dept. of State)		
P15000022274				
(Document Nur	nber of Corporation (if knowr	1)		
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s. this <i>Florida Profit Corpora</i>	ttion adopts the follo	owing ameno	lment(s)
A. If amending name, enter the new name of the corporati	on:			
Pro Builders and Rooting Inc			The i	95-71.°
name must be distinguishable and contain the word "corporatio" lnc., " or Co., " or the designation "Corp," "Inc," or "C "chartered," "professional association," or the abbreviation	o". A professional corpora		viation "Cor _i	D., ''
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	······································			
			20	
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			i EB	
			5	
				[
				رسه. الم _{عدد} -
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office agent.		he name of the	30	
Name of New Registered Agent	<u> </u>			
(Flo	rida street address)			
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	_
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan		igations of the posit	ion	
Nignature of	New Registered Agent, if char	างเทง		
	пен подыстей адет, у спиг	igiag		
Check if applicable				

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

Evample: XChange	<u>PT</u>	<u>John Do</u>	<u>oe</u>				
X Remove	<u>V</u>	Mike Jo	nes				
X Add	<u>sv</u>	Sally Sn	nith				
Type of Action (Check One)	Title		<u>Name</u>			<u>Addres</u> s	
1) Change		_					· · · · · · · · · · · · · · · · · · ·
Add							
Remove							
2) Change		_		<u>-</u>			
Add							
Remove 3) Change							
Add							
Remove							
4) Change							
Add							
Remove							
5) Change							
Add							
Remove							<u>. </u>
6) Change							
, Add					<u></u>		
Remove							

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<u>f an amendment provides for an exchai</u>	nge, reclassification, or cancellation of issued shares,
provisions for implementing the amend	Iment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

. . .

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholder a	ection and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendme sufficient for approval.	ent(s)
☐ The amendment(s) was/were as must be separately provided for	oproved by the shareholders through voting groups. The following states are each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
2/9/21		
Dated		
Signature		
(By a select	director, president or other officer - if directors or officers have not be ed, by an incorporator - if in the hands of a receiver, trustee, or other onted fiduciary by that fiduciary)	en ourt
	Randy A Rodriguez	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	

. . . .