## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6390

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone : (323) 962-8600 Fax Number : (323) 962-3869

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

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN **CWB MATERIALS INC.**

| Certificate of Status | 0       |
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| COVER | LETTER |
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|   |  | COVER LETTER   |  |             |          |              |
|---|--|--|--|-------------|----------|--------------|
| TO: Amendment Sect<br>Division of Corpo |  |  |  |             | 15 JUN ( |              |
| NAME OF CORPOR                          | RATION: CWB Materials In   | 1C.  |  |             | 29       | Contract)    |
| DOCUMENT NUMI                           | BER: P15000030920  |  |  |             | 7        | 1) \$1/5<br> |
|   | of Amendment and fee are su  | bmitted for filing.  |  |             | 5: 03    |              |
| Please return all corres                | spondence concerning this ma   | tter to the following:   |  | ***         | <u> </u> |              |
|   | Cheyenne Moseley   |  |  |             |          |              |
|   |  | Name of Contact Person   | 1  | <del></del> |          |              |
|   | LegalZoom.com, Inc.  |  |  |             |          |              |
|   |  | Firm/ Company  |  |             |          |              |
|   | 100 W. Broadway Suite 10   | - •  |  |             |          |              |
|   |  | Address  |  |             |          |              |
|   | Glendale, CA 91210   |  |  |             |          |              |
|   |  | City/ State and Zip Code   | e  |             |          |              |
| bob@                                    | Dcwbmaterials.com  |  |  |             |          |              |
|   |  | sed for future annual report                                       | notification)  |             |          |              |
| For further information                 | n concerning this matter, pleas  | e call:  |  |             |          |              |
| Cheyenne Moseley                        | _  | at (323  | , 962-8600 ext 7950  |             |          |              |
| Name                                    | of Contact Person  | Area Co  |  | ег          |          |              |
| Enclosed is a check fo                  | r the following amount made p  | payable to the Florida Depa  | irtment of State:  |             |          |              |
| ☐ \$35 Filing Fee                       | ☐\$43.75 Filing Fcc & Certificate of Status                                  | ✓ S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |             |          |              |
| Amo<br>Divi<br>P.O.                     | ling Address endment Section ston of Corporations Box 6327 ahassee, FL 32314 | Amend<br>Divisio<br>Clifton<br>2661 E                              | Address ment Section n of Corporations Building xecutive Center Circle ussee, PL 32301             |             |          |              |

|  |   | 5                                     |
|--|---|---------------------------------------|
|  | Articles of Amendment   |                                       |
|  | to<br>Articles of Incorporation   | <b>元</b>                              |
|  | of  |                                       |
|  | CWB MATERIALS INC.  | 河南 3                                  |
| (Name of Corporation as current  | ily filed with the Florida Dept. of State)  | <u> </u>                              |
|  | P15000030920  | 99 79                                 |
| (Document Number   | er of Corporation (if known)  |                                       |
| tursuant to the provisions of section 607.1006, Flo<br>ts Articles of Incorporation:   | orida Statutes, this Florida Profit Corporation   | r adopts the following amendment(     |
| L If amending name, enter the new name of th   | se corporation:   |                                       |
|  |   | The new                               |
| ame must be distinguishable and contain the<br>Corp.," "Inc.," or Co.," or the designation "Co.  |   |                                       |
| vord "chartered," "professional association," or   | the abbreviation "P.A."   |                                       |
| . Natural affice of duces if combine   | ables   |                                       |
| l. <u>Enter new principal office address, if applic</u><br>Principal office address <u>MUST BE A STREET</u>  |   | · · · · · · · · · · · · · · · · · · · |
|  |   |                                       |
|  |   |                                       |
|  |   | <u> </u>                              |
| 5 m  |   |                                       |
|  |   |                                       |
| (Mailing address MAY BE A POST OFFICE  | BOX   |                                       |
|  | <u>B()X</u> )   |                                       |
|  | <u>BOX</u> )  |                                       |
| C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE</u>   | : BQX)  |                                       |
| (Mailing address: <u>MAY BE A POST OFFICE</u>  |   |                                       |
| (Mailing address MAY BE A POST OFFICE  | istered office address in Florida, enter the t  | name of the                           |
| (Mailing address MAY BE A POST OFFICE  | istered office address in Florida, enter the t  | name of the                           |
| (Mailing address MAY BE A POST OFFICE  | istered office address in Florida, enter the t  | name of the                           |
| (Mailing address MAY BE A POST OFFICE  ). If amending the registered agent and/or registered agent and/or the new registered agent.  | istered office address in Florida, enter the t  | name of the                           |
| (Mailing address MAY BE A POST OFFICE  ). If amending the registered agent and/or registered agent and/or the new registered agent.  | istered office address in Florida, enter the t  | name of the                           |
| (Mailing address: MAY BE A POST OFFICE  ). If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent                            | istered office address in Florida, enter the rered office address:  (Florida street address)                            | <del></del>                           |
| (Mailing address MAY BE A POST OFFICE  ). If amending the registered agent and/or registered agent and/or the new registered agent.  | istered office address in Florida, enter the pared office address:  (Florida street address)                            | da                                    |
| (Mailing address: MAY BE A POST OFFICE  ). If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent                            | istered office address in Florida, enter the rered office address:  (Florida street address)                            | <del></del>                           |
| (Mailing address: MAY BE A POST OFFICE  ). If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent                            | istered office address in Florida, enter the pared office address:  (Florida street address)                            | da                                    |
| (Mailing address: MAY BE A POST OFFICE  ). If amending the registered agent and/or registered registered agent and/or the new register  Name of New Registered Agent  New Registered Office Address: | jstered office address in Florida, enter the rered office address;  (Florida street address)  (City)                    | da                                    |
| (Mailing address MAY BE A POST OFFICE  ). If amending the registered agent and/or reg new registered agent and/or the new registered Agent  Name of New Registered Agent                             | istered office address in Florida, enter the sured office address:  (Florida street address)  (City)  Registered Agent: | da(Zip Code)                          |

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 Y. There is a change, Mike Jones leaves the corporation, Sally Smith is named the Y and S. These should be noted as John Doe, PT as a Change, Mike Jones, Y as Remove, and Sally Smith, SY as an Add.

| X Change                      | <u>PT</u>   | <u>John Doc</u> |                        |
|-------------------------------|-------------|-----------------|------------------------|
| X Remove                      | <u>v</u>    | Mike Jones      |                        |
| _X Add                        | <u>\$V</u>  | Sally Smith     |                        |
| Type of Action<br>(Check One) | Title       | Name            | <u>Addres</u> s        |
| 1) Change                     | S           | LARHONDA ESLICK | 9406 FULTON AVE. # 102 |
| Add                           |             |                 | HUDSON, FL 34667       |
| X Remove                      |             |                 |                        |
| 2) X Change                   | PSTD        | ROBERT WRIGHT   | 9406 Fulton Ave. # 102 |
| Add                           |             | ·               | HUDSON, FL 34667       |
| Remove                        |             |                 |                        |
| 3 ) Change                    |             |                 |                        |
| Add                           |             |                 |                        |
| Remove                        |             |                 |                        |
| 4) Change                     | <del></del> | _               |                        |
| Add                           |             |                 |                        |
| Remove                        |             |                 |                        |
| 5) Change                     |             |                 |                        |
| Add                           |             |                 |                        |
| Remove                        |             |                 |                        |
| ^ <b>~</b>                    |             |                 |                        |
| 6)Change                      |             |                 |                        |
| Add                           |             |                 |                        |
| Remove                        |             |                 |                        |

|  | cles, enter chappe(s) here: (Be specific)  |
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| If an amendment provides for an exchi-<br>providing for implementing the amer<br>(if not applicable, indicate N/A) | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
| provisions for implementing the amen   | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
| provisions for implementing the amen   | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself: |
| provisions for implementing the amen   | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself; |
| provisions for implementing the amen   | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself; |
| provisions for implementing the amen   | ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself; |

| The date of each amendment(s) adoption: 6/4/2015  | _ if other than the |
|---|---------------------|
| date this document was signed.  |                     |
| Effective date if applicable:   | <del>-</del>        |
| (no more than 90 days after amendment file date)  |                     |
| 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 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"  (voling group)   |                     |
| (voling 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 6-21-15   |                     |
| Simple  |                     |
| Signature  (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) | <del></del>         |
| ROBERT WRIGHT   |                     |
| (Typed or printed name of person signing)   |                     |
| PRESIDENT   | _                   |
| (Title of person signing)   |                     |