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TO: Amendifient Section Division of Corporations

NAME OF CORPORATION: PERRI DOCUMENT NUMBER: P150000	CABINI 07375	ETRY & Millwor
The enclosed Articles of Amendment and fee are submit	tted for filing.	
Pere CABI 17 Pour 11 Neprine 1 Formic Person	Name of Contact Person Firm/ Company Address City/ State and Zip Code For future annual report re	Millwork inc - St. A - 32266 Committed incommentation
For further information concerning this matter, please ca	ill:	-/28-1251
Name of Contact Person	at (le & Daytime Telephone Number
Enclosed is a check for the following amount made paya	able to the Florida Depar	tment of State:
Certificate of Status	1\$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	Street A	Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to **Articles of Incorporation**

FILED

of
Perri Cabinetry & millwork IMEP 17 PM 1:24
(Name of Corporation as currently filed with the Florida Dept. of State) Wat YOF STATE
PISOOOG73751 TALLAHASSEE, FLORIDA
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. Jf amending name, enter the new name of the corporation:
The new
name must be distinguisnable 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."
From It feed
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
17 Ponte Vedra Ct. Ste A
A / Marie VI
Mestine Bch Fr 32082
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
17 PONTR VECEA CT STEA
TOO TE VICE TO SICE
Porte Vecken Boh Fr
70/11 E V 2001 DO C 7
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:
) = 13:
Name of New Registered Agent Washing Talking
12 2 may lodge a - 1/2 - 1/2 de FT
THOMEVECE CT NOMI-EVECTOR
(Florida street address) St. H 32082
New Registered Office Address: Vonte Vecra (3ch Gelorida 37082
(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.

	ove, and saliy smith, s	or us un Auu.		
Example: X Change	PT John Do	<u>e</u>		
X Remove	V Mike Jo	nes		
X Add	SV Sally Sn	<u>nith</u>		
Type of Action (Check One) 1) Change Add Remove	Title Pres (Name Frank Pere,	Address 17 Ponte VedRACT HIPPONTE VedRACT SZC	Ste Se Se 7
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
Adding Frank Doppe as President	_V - elcinc
No Add money ARTICLE JUST OFFICE	R
PONTE VECRA FA 52082	- - -
	- - -
	- - -
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
WA	· - -
	- - -
	-

The date of each amendment(s) adoption: 9-15-15 date this document was signed.	, if other than the
Effective date if applicable: ' 7-15-15 (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 document's effective date on the Department of State's records.	will not be listed as the
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 can the amendment(s) was/were sufficient for approval	
by	
☐ 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.	
Dud 9-15-15	
Signature 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)	
appointed indicatory by that indicatory,	
TRANK PERRI	
(Typed or printed name of person signing)	
troudy Doni Drosid	ent

(Title of person signing)