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SEP 30 2015

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Fleck Brothers Home Improvement, INC.
DOCUMENT NUMBER: P15000074014
The enclosed Articles of Amendment and fee are submitted for tiling.
Please return all correspondence concerning this matter to the following:
Robert J Fleck
Fleck Brothers Home Improvement Inc.
4620 WATKINS AVE
SAMSOFA, FL 34231
City/ State and Zip Code
E-mail address: (to be used for future annual report indiffication)
For further information concerning this matter, please call:
Robert J Fleck 111 941, 800-6229
Name of Contact Puscin Aum Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Clifton Building

2061 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

(O

7 (100)

Articles of Incorporation

	IALLAHASSLE, FLORIDA
(Document Number of Corporation (if known	
rsuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corpo Articles of Incorporation:	pration adopts the following amendment
If amending name, enter the new name of the corporation:	
NIA	The new
me must be distinguishable and contain the word "corporation," "company," or Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional association," or the abbreviation "P.A." Enter new principal office address, if applicable:	"incorporated" or the abbreviation to corporation name must contain the
rincipal office address MUST BE A STREET ADDRESS)	
[Mailing address MAY BE A POST OFFICE BOX] If amending the registered agent and/or registered office address in Florida, enternew registered agent and/or the new registered office address:	the name of the
Name of New Registered Agent N/4	
(Florida street aldress)	
	, Florida
New Registered Office Address: N/4	

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)

P == President; V == Vic	ce President; (* O ::: Chief Fino	the first letter of the office title: "Treasurer; S= Secretory: D - Director; TR= I uncial Officer. If an officer/director holds more	rustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office
held, President, Treasi	wer, Director w ted in the follow teams the corps	ionia ne v 115. ing manner. Currently John Doe is listed as the oration, Sally Smith is named the F and S. These	PST and Mike Jones is listed as the V. There is
Example:		ohn Doe	
X Change	<u> 10</u>	IIII DAS	
X Remove	<u>v</u> M	like Jones	
X Add	<u>sv</u> s	ally Smith	
Type of Action (Check One)	Title	Michael A. Spicer	Address 4620 Wattern Ave
1) Change	V	Muhael A. Spicer	Savar ty, FL 39231
Add	,		, 14-14-14-14-14-14-14-14-14-14-14-14-14-1
Remove	Con	Mathaew K Buskink	4620 WATKIN AVE SAVASIFA, FL 34231
2)Change	Stel	prigrition / Outsites	SAVASIFA, PUDIUS
Remove			
3)Change			
Add			
Remove			
4) Change	5 or word in American Street,		
Add			
Remove			
5) Change	ياملمد و مايا يون		<u>-</u>
Add			
Remove			
6)Change		al market reference	
Add			

___ Remove

Please add	Milhae	(A. 5	O/LCR	to my	Corpa
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Corporation					
Co paration	2				
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n amendment provides for ovisions for implementing	an exchange, recli	assification, or car	cellation of issue	d shares,	
(if not applicable, indicate	N/A)		The state of the s	<u> </u>	
Please add	Michael	$A \in$			
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10% 5,	6 march				
10% S	TARE				
18% So	Mattle	w K B	suskie,	K. Aleka	

• • • •	9/20/15
The date of each amendment(s) adoption date this document was signed.	i;, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Departme	oes not meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted h by the shareholders was/were sufficien	y the shareholders. The number of votes east for the amendment(s) t for approval.
☐ The amendment(s) was/were approved must be separately provided for each t	by the shareholders through voting groups. The following statement poting group entitled to vote separately on the amendment(s):
"The number of votes east for the	amendment(s) was/were sufficient for approval
hy	(voting group)
☐ The amendment(s) was/were adopted be action was not required.	y the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder
Dated	3/15
Signature Male	1 Hul
selected, by a	president or other officer—if directors or officers have not been a incorporator—if in the hands of a receiver, trustee, or other court actary by that liduciary)
R	obert Fleck
	(Typed or printed mane of person signing)
***	President
	(Tifle of person signing)

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