P15000079989

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: KG HOME SAL	ES INC
DOCUMENT NUMBER: P15000079989	
The enclosed Articles of Amendment and fee are s	submitted for tiling.
Please return all correspondence concerning this n	natter to the following:
BRYAN GIRGENTI	
	Name of Contact Person
CUSTOM ACCOUNTING	INC
 	Firm/ Company
498 ESTHER LANE	
 	Address
ALTAMONTE SPRINGS,	Fl. 32714
	City/ State and Zip Code
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ase call:
BRYAN GIRGENTI	at (407) 880-1151 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

2519 ACV 15 PH 35 47

KG HOME SALES INC		
(Name of Corpor.	ation as currently filed with the Flo	rida Dept. of State)
P15000079989		
(Doc	cument Number of Corporation (if kno	wn)
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	ida Statutes, this Florida Profit Corp.	prution adopts the following amendment(s) t
A. If amending name, enter the new name of the	corporation:	
KG HOME SALES PA		II The store
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered." "professional association," or t	orp," "Inc," or "Co". A professione	"incorporated" or the abbreviation al corporation name must contain the
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE L</u>	BON	
D. If amending the registered agent and/or registered agent and/or the new registered		r the name of the
Name of New Registered Agent		
	(Florida street address)	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		, Florida
	(City)	(Lip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	legistered Agent: i. I am familiar with and accept the a	obligations of the position
	imputure of New Registered Agent if r	banaina

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.

X Change	<u>PT</u>	John Do	2	
X Remove	Y	Mike Jos	nes	
\underline{X} Add	<u>sv</u>	Sally Sn	<u>rith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change	_	_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary). (Be specific) Profession is Real Estate Sales
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)

The date of each amendment(s) date this document was signed.	adoption:	, 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 document's effective date on the E	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	5)
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	lopted by the board of directors without shareholder action and shareholde	ı
The amendment(s) was/were ac action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	3 Hove	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other courned fiduciary by that fiduciary)	t
	KENNETH GORE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	