Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

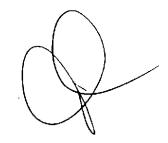
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| | Division of Corporations | | | | |
| | Fax Number : (850)617-6380 | | | | |
| rom: | | | | | |
| | Account Name : CG TAX, INC. | | | | |
| | Account Number : 119990000017 Phone : (305)485-9300 | | | | |
| | Fax Number : (305)485-1098 | | | | |
| | **Enter the email address for this business annual report mailings. Enter only on | entity to be use email address | sed for fu please.** | ture | 20 |
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Articles of Amendment to Articles of Incorporation of

| ALL HOME SOLUTIONS & INSTALL. | | | |
|--|--|---|--|
| (Name o | f Corporation as currentl | y filed with the Florida Dept. of St | ate) |
| P15000095248 . | | | |
| | (Document Number o | f Corporation (if known) | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | 1006, Florida Statutes, this | Florida Profit Corporation adopts t | he following amendment(s) to |
| A. If amending name, enter the new na | ime of the corporation: | | |
| CUSTOMIZED BUILDERS, INC. | | | The new |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "C" chartered," "professional association," | lorp," "Inc." or "Co". : | i projessional corporation nume n | abbreviation "Corp" nust contain the ord |
| | | 1111 Park Centre Blvd Suite 20 | |
| B. Enter new principal office address, (Principal office address MUST BE A.S. | TREET ADDRESS) | Miami Gardens Fl 33169 | 20 |
| | | | |
| | | | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | icable: OFFICE BOX) | 1111 Park Centre Blvd Suite 20 | 0 77 9 |
| The second secon | | Miami Gardens FI 33169 | |
| D. If amending the registered agent an new registered agent and/or the new | id/or registered office add w registered office address | ress in Florida, enter the name of | the . |
| Name of New Registered Agent | | | |
| | 1111 Park Centre Blvd St | nite 200 | |
| | (Florida st | real address) | |
| New Registered Office Address: | MIAMI GARDENS | , Flor | ida |
| Ment West District States - Hand one | | (City) | (Zip Code) |
| New Registered Agent's Signature, if a I hereby accept the appointment as regis | thunging Registered Agen tered ugent. I am familiar | ti with and accept the obligations of th | ne position |
| • | Signature of New I | Registered Agent, if changing | |
| 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 officeridirector 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.

| Example: X Change | <u>PT</u> | John Doe | |
|-------------------------------|--------------------------|---------------|--|
| X Remove | $\underline{\mathbf{Y}}$ | Mike Iones | |
| X Add | <u> </u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
| 1) X Change | P | SAIVAY, JORGE | 1111 Park Centre Blvd Suite 200 |
| | | | Miami Gardens Fl 33169 |
| Add | | | 2023 |
| Remove | | | HAR 20 |
| 2) Change | | | 220 |
| Add | | | (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4 |
| Remove 3) Change | | | 99 |
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| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| | | | <u></u> |
| 6) Change | | _ | |
| Add | | | |
| Remove | | | |

| | us, if necessary). | icles, enter change(s) he (Be specific) | | | | |
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| | vides for an excl | hange, reclassification, o | or cancellation of | issued shares. | | |
| If an amendment <u>pro</u> | | endment if not contained | d in the amendme | nt itself: | | |
| provisions for imple | menting the ame | | | | | |
| provisions for imple (if not applicable | menting the ame , indicate N/A) | | | | | |
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| | it(s) adoption: | | | _, if other than th |
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| ate this document was signe | d. | | | |
| ffective date <u>if applicable</u> : | (no more that | : 90 days after amendment file de | ate) | |
| | , | | | |
| ote: If the date inserted in ocument's effective date on | this block does not meet the app the Department of State's records | plicable statutory filing requirem s. | ents, this date will | not be listed as th |
| doption of Amendment(s) | (CHECK ONE) | | | |
| The amendment(s) was/w action was not required. | ere adopted by the incorporators, | or board of directors without shar | reholder action and | shareholder |
| The amendment(s) was/w by the shareholders was/v | ere adopted by the shareholders. I were sufficient for approval. | The number of votes cast for the | amendment(s) | |
| The amendment(s) was/w must be separately provid | ere approved by the sharcholders led for each voting group entitled | through voting groups. The follo to vote separately on the amend | ment(s). | 202 |
| | es cast for the amendment(s) was/ | were sufficient for approval | ANTONIA E | €-18 2023 HAR 20 |
| by | (voting group) | ,,,,,,, | 1.5 | 50 |
| | | | ₹. . | - 11 |
| MAI Dated | RCH 14, 2023 | | | ۇ |
| Signature | Jorge Saway | | | - |
| | By a director, president or other c selected, by an incorporator - if ir appointed fiduciary by that fiducia | n the hands of a receiver, trustee, | or other court | |
| | JORGE SAIVAY | | | |
| | · (Typed or print | ted name of person signing) | | |
| | PRESIDENT | | | |
| | (Title of persor | ı signing) | | |