P160000041116

| \ | | | | |
|-------------------------|------------------------|--|--|--|
| (Re | questor's Name) | | | |
| | | | | |
| <u> </u> | dress) | | | |
| (,70 | uless) | | | |
| | | | | |
| (Address) | | | | |
| | | | | |
| | | | | |
| (Cit | y/State/Zip/Phone #) | | | |
| | | | | |
| PICK-UP | ☐ WAIT ☐ MAIL | | | |
| | | | | |
| | | | | |
| (Bu | siness Entity Name) | | | |
| | | | | |
| | average Number | | | |
| (DC | cument Number) | | | |
| | | | | |
| Certified Copies | Certificates of Status | | | |
| | | | | |
| | | | | |
| Special Instructions to | Filing Officer: | | | |
| · | | | | |
| | 1 | | | |
| | | | | |
| • | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | <u> </u> | | | |
| | Office Use Only | | | |
| | 5oo ooo om, | | | |



30030531955

11/06/17--01029--032 **35.00

SECREDIANT IN SEAST

Hinund

NOV - 8 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: _ _ TOM FOX CARPENTRY OF FLORIDA INC DOCUMENT NUMBER: P16000041116 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: TOM FOX Name of Contact Person TOM FOX CARPENTRY OF FLORIDA INC Firm/ Company 2014 WINWARD PASS Address LAKELAND FL 33801 City/ State and Zip Code MICHELE.NELSON@MNELSONCPA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MICHELE BOURCY NELSON CPA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee ■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

| | Afficies of Amendment | |
|--|---|---------------------|
| | Articles of Incorporation | |
| | of | |
| TOM FOX CARPENTRY OF FLORIDA | A INC, | : |
| (Name o | of Corporation as currently filed with the Florida Dept. of State) | |
| P16000041116 | | |
| | (Document Number of Corporation (if known) | |
| | (120cument rumber of corporation (11 known) | |
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following | amendment(s) to |
| A. If amending name, enter the new na | ime of the corporation: | 1 |
| | | The new |
| name must be distinguishable and conti "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | tain the word "corporation," "company," or "incorporated" or the abation "Corp," "Inc," or "Co". A professional corporation name must c | brevi g tion |
| B. Enter new principal office address, | if applicable: | |
| (Principal office address MUST BE A S | TREET ADDRESS) | 1 |
| | | |
| 1 | | 2 |
| C. Enter new mailing address, if appli | cable: | 是一切 |
| (Mailing address MAY BE A POST) | | 5 - |
| | <u> </u> | 3 |
| | Fri 1 | 72 |
| | | |
| D. If amending the registered agent an | d/or registered office address in Florida, enter the name of the | |
| new registered agent and/or the new | w registered office address: | - 4 |
| Name of New Registered Agent | MICHELE BOURCY NELSON | 1 1 |
| Nume of New Registered Agent | 5300 S FLORIDA AVE STE 3 | |
| | (Florida street address) | |
| | LAVELAND 33813 | 1 |
| New Registered Office Address: | (City) , Florida (Zip C | 1 1 |
| | (City) | |
| | | 1 |
| New Registered Agent's Signature, if c | hanging Registered Agent: | 1 1 |
| I hereby accept the appointment as regist | ered agent. I am familiar with and accept the obligations of the position. | 1 1 |
| Mak | Signature of New Registered Agent, if changing | |
| | | |
| | | |
| 1 | | 4 .1 |

| address of each Office (Attach additional she Please note the office P = President; V = V Executive Officer; Clindle President, Treas Changes should be not a change, Mike Jones | cer and/or E eets, if necess r/director tite ice Presiden FO = Chief i surer, Direct oted in the fo s leaves the c | Director being added: sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary; D= D Financial Officer. If an officer/direct for would be PTD. bllowing manner. Currently John Doe | of each officer/director being removed and title birector; TR = Trustee; C = Chairman or Clerk; Our holds more than one title, list the first letter of its listed as the PST and Mike Jones is listed as the PST and S. These should be noted as John Doe PT | GEO = Chief f each office e V. There is |
|--|---|---|---|---|
| X Change | <u>PT</u> | John Doe | | |
| X Remove | <u>Y</u> | Mike Jones | | |
| X Add | <u>sv</u> | Sally Smith | | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s | 1 |
| 1) Change | v | DENNIS ALLEN | 1910 BEECHWOOD DR. | 1 |
| X Add | | | LAKELAND FL 33803 | |
| Remove | | | | 1 |
| 2) Change | . | | | |
| Add | | | | - |
| Remove | i. | | | <u> </u> |
| 3) Change | | | | 1 |
| Add | | | | - ! |
| Remove | | | | 1 |
| 4) Change | | | | <u> </u> |
| Add | | | | |
| Remove | | | | |
| | | | | |
| 5) Change | \ | | | - " |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | <u> </u> |
| Remove | | | | |
| | 1 | | 1 | - 1 |

Page 2 of 4

| If a manding of a | dding additional Articles, enter change(s) here: | |
|---------------------------|--|----------|
| (Attach <i>addition</i> a | sheets, if necessary). (Be specific) | |
| | | - |
| | | 7 |
| | | !] |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | 1 |
| | | <u> </u> |
| | | |
| | | |
| | | |
| provisions for i | tprovides for an exchange, reclassification, or cancellation of issued shares, inplementing the amendment if not contained in the amendment itself: icable, indicate NA) | |
| FFECTIVE OCTO | BER 31, 2017, SHAREHOLDER DENNIS ALEEN HAS BEEN ELECTED VICE PRESIDENT | 1 |
| | | 1 |
| | | 1 |
| | | 1 |
| | | 1 |
| | | 1 |
| | | - |
| | | 1 |
| | | |
| | Page 3 of 4 | |

| October 31, 2017 | | |
|---|--|------------------------------|
| The date of each amendment(s) adoption: | <u> </u> | ther than the |
| date this document was signed. | 1 ! | |
| October 31, 2017 | 1 1 | |
| Effective date if applicable: | 1 1 | |
| (no more than 90 days after amendment file date) | 1 | |
| mo more than 20 days after amendment for aller | d d | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records. | 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 cast for the amendment(s) was/were sufficient for approval | | |
| by | 1 | 4 |
| (voting group) | 1 | 1 |
| ☐ 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. | | |
| | Ĭ. | |
| Dated | 1 | |
| 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) | | |
| THOMAS FOX 7 | ļ | |
| THOMASTON / | 1 | 4 |
| (Typed or printed name of person signing) | 1 | - |
| PRESIDENT | | |
| (Title of person signing) | - | |
| | j | al |
| | - 1 | 'l |