## P1600053589

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: WOOD-MASTER	R GUILD INC				
DOCUMENT NUM	P1000053589					
The enclosed Article	s of Amendment and fee are su	abmitted for filing.				
Please return all corr	espondence concerning this ma	itter to the following:				
	GIUSEPPE VAN OORDT					
		Name of Contact Pers	son			
	WOOD-MASTER GUILD INC					
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company				
	2200 NORTH ANDREWS AVE, SUITE A					
		Address				
	POMPANO BEACH, FL 33	069				
		City/ State and Zip Co	ode			
GIU	SEPPE@WOODMASTERGU	IILD COM				
	•	sed for future annual repo	ort notification)			
For further information	on concerning this matter, pleas	se call:  561	702 7803			
Name	of Contact Person		Code & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida De	partment of State:			
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ame Divis Clifto	et Address Indment Section It is is a continuous on Building Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## WOOD-MASTER GUILD INC

( <u>ivaine o</u>	f Corporation as curren	ntly filed with the Florida Dept. of State)		
P1000053589				
	(Document Number	of Corporation (if known)		
tursuant to the provisions of section 607.  S Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendment(s)		
. If amending name, enter the new na	me of the corporation:			
N/A		The new		
C/	ation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2200 NORTH ANDREWS AVENUE, SUITE A		
		POMPANO BEACH, FL 33069		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2200 NORTH ANDREWS AVENUE, SUITE A		
		POMPANO BEACH, FL 33069		
		<del></del>		
		dress in Florida, enter the name of the		
new registered agent and/or the new registered office address		<u>ss:</u>		
Name of New Registered Agent	N/A	co  n		
	N/A			
	NA	<u> </u>		
		street address)		
New Registered Office Address:				

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.

Example: X Change	<u>PT</u>	John D		
X Remove	$\underline{\mathbf{v}}$	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
		Sally S		
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	VDCI	FO H	GIUSEPPE GIOVANNI VAN OORI	2200 NORTH ANDREWS AVEN
X Add				POMPANO BEACH, FL 33069
Remove				
2) Change		_		
Add				
Remove				
3)Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6)				
δ) Change	<del></del>			
Add				
Remove				

. If amending or adding addition (Attach additional sheets, if neces	al Articles, enter change(s) sary). (Be specific)	here:	
i/A	• • •		
··-			
		•	
<del> </del>			
			<del></del>
<del></del>	<del></del>		
	<del> </del>	<del></del>	<del></del>
	<del></del>		
. If an amendment provides for a	n exchange, reclassification	, or cancellation of issue	ed shares,
provisions for implementing the (if not applicable, indicate N	e amendment if not contain	ed in the amendment its	self:
(ij noi applicable, inalcale r NA	7A)		
- <u>-</u>			
<del></del>			<del> </del>
		·	<del> </del>

	11-02-2018	
he date of each amendment(s	s) adoption:	, if other than the
ate this document was signed.	11.02.2018	
Offective date if applicable:	11-02-2018	
meetive date in applicable.	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	l not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the amendment(s) re sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
activit was not required.		
11-01-2	2018	
sele	a director-president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	<del></del>
	•	
	LUIGI VAN OORDT	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>