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COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporati	ons			
NAME OF CORPORAT	TION: Craff	SMIAN Buil	ders Jones 1 (0	nostruction.
DOCUMENT NUMBER	: <u> </u>	<u>0000583</u>	5517	$\sum \alpha$
The enclosed Articles of A	mendment and fee are su	ibmitted for filing.		
Please return all correspon	dence concerning this ma	itter to the following:		
	Bever Praftsman 165 Bi Ormono 6 homes	Name of Contact Person Bul dess 9 Firm/ Company Address City/ State and Zip Code Sed for future annual report	lane + Constru 4/ 32174	thou , ela
For further information co		,		æ
			de & Daytime Telephone Number	_
Enclosed is a check for the	following amount made	payable to the Florida Depa	urtment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	X\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing	Address	Street	Address	

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassec, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

CRAFTSMAN BUILDERS HOMES & CONSTRUCTION, INC.

(None of Camputing an august)	le Clade data to Direct Donate of Control
(Name of Corporation as current	ly filed with the Florida Dept. of State)
PILODO) <i>0.585</i> 57
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this	Florida Profit Cornoration adonts the following amendment(s) to
its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
A. If amending name, enter the new name of the corporation.	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the
P. Enter new principal office address if applicables	NA
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	TALL SE SE
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	The E
	<u> </u>
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	
W. C.W. D. C. C.C.	41/14
Name of New Registered Agent	
(Florida su	vet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Compton of Man I	During Advances of the second
, ,	Registered Agent, if changing
	t to Stay Came
Kay 1 stered 17	sent to Stay Same
$^{\cdot}\mathcal{O}$	U

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.

Mike Jones, V as Remove	, and Sal	ly Smith, SV as an Add.	
Example: X Change	PT	John Doe	
X Remove	Y	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u></u>	Bernard F. Pietrzykin	uski
Add Remove		,	Ornord Bk, 41
2) Change			32///
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			7
Remove			

amending or adding additional Articles, etach additional sheets, if necessary). (Be.	specific)
(2.0.1)	
	
in amendment provides for an exchange,	reclassification, or cancellation of issued shares,
ovisions for implementing the amendmen	nt if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(y uppromote, manager,	
•	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	····
(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this block does not meet the applicable statutory filing requiren document's effective date on the Department of State's records.	nents, this date will 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 by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amend.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action ar action was not required.	id shareholder
Dated Signature (By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee,	ve not been
appointed fiduciary by that fiduciary)	or other court
Beverly J Pietrz	yKowski
(Typed or primed name of person signing)	I
President	
(Title of person signing)	