## P10000186874

(Re	questor's Name)	,
(Ad	dress)	
——————————————————————————————————————	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL.
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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C. GOLDEN APR 2 5 2018

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	rion: GAD FRAMING I	NC		
DOCUMENT NUMBER	R: P16000086874			
	<b>Amendment</b> and fee are su	bmitted for filin	g.	
Please return all correspon	ndence concerning this man	tter to the follow	ving:	
Nic	CHOLAS FANELLAS			
		Name of Cor	ntact Person	
NR	FANELLA & CO INC			
<del>-</del>		Firm/ Co	ompany	
434	TANGLEWOOD DRIVI	Ε		
	Address			
FT	WALTON BEACH FL 32	2547		
		City/ State a	nd Zip Code	
NFANEL	LA@COX.NET			
<del></del>	E-mail address: (to be us	ed for future an	nual report	notification)
			•	
For further information co	ncerning this matter, pleas	e call:		
NICHOLAS FANELLA		21.6	350	862-7131
Name of C	ontact Person	at (_	Area Coo	862-7131 de & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fec	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Fili Certified C (Additional enclosed)	ору	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendr Divisior P.O. Bo	Address nent Section n of Corporations x 6327 ssee, FL 32314		Amendi Division Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

GAD FRAMING INC

2018 APR 23 PM 2: 46

(Ivanie of Corporation	
16000086874	on as currently filed with the Florida Dept. of State) SECRETARY OF TALLAHASSEE.
	ment Number of Corporation (if known)
·	Statutes, this Florida Profit Corporation adopts the following amendment
If amending name, enter the new name of the co	erporation:
	The new
	d "corporation," "company," or "incorporated" or the abbreviation," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
Enter new principal office address, if applicable rincipal office address MUST BE A STREET ADD	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>X</u> )
	red office address in Florida, enter the name of the
	omice address:
new registered agent and/or the new registered	<del></del>
new registered agent and/or the new registered	
new registered agent and/or the new registered	<del></del>
new registered agent and/or the new registered	

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 Doe	
X Remove	$\underline{\mathbf{v}}$	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) Change	VP	CRISTIAN ESPINOZA	60 SOUTH 17TH STREET
X Add			DE FUNIAK SPRINGS FL 32433
Remove			
2) Change	<u></u>	_	
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			. <u>.                                   </u>
6) Change			
Add	<del>-</del>	_	
Remove			

	. (Be specific)
76-81-36-36-36	
***************************************	
***	
an amandment provides for an available	shange realessification or especilation of issued shares
rovisions for implementing the ame	change, reclassification, or cancellation of issued shares, sendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	tenement it not contained in the uncondition listing
(i) not approxime, mareate (iii)	

The date of each amendment(s) ad	option:	_, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ador by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	21	
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopt action was not required.  Dated	oted by the incorporators without shareholder action and shareholder	
(By a directed	rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	_
5	SAUL FRANCISCO	
-	(Typed or printed name of person signing)	
I	PSS	
<del>-</del>	(Title of person signing)	