P16000097259

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------------|
| (Ac | ddress) | |
| (Ac | ddress) | |
| (Ci | ty/State/Zip/Phone | ; #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Вс | usiness Entity Nan | ne) |
| (Do | ocument Number) | , |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

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TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: BUT Mansory Inc. |
|--|
| DOCUMENT NUMBER: P1600097259 |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Cynthia & Maldonado Name of Contact Person |
| raine of Contact reison |
| Firm/ Company |
| 3673 Almar Road Address |
| late Water El 32111 |
| City/ State and Zip Code |
| |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Cynthia Maldonado at (561) 370-2787 Name of Contact Person Area Code & Daytime Telephone Number |
| |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |
| \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment Section |

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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| BAT Mansoly | IAC. | | |
|--|---|-----------------------------------|------------------------|
| (Name of Corpora | ation as currently filed wi | th the Florida Dept. of State) | |
| 6/60000 97259 | | | |
| (Doc | cument Number of Corporat | ion (if known) | |
| Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation: | ida Statutes, this <i>Florida P</i> | rofit Corporation adopts the fol | lowing amendment(s) to |
| A. If amending name, enter the new name of the | corporation: | | 議至三 |
| _B&T Masonry = | Inc | | STEP NEW T |
| name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co. word "chartered," "professional association," or th B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET A) | orp," "Inc," or "Co". A p he abbreviation "P.A." ble: | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E | 3 <i>0X</i>) | | |
| D. If amending the registered agent and/or registered agent and/or the new registered | | orida, enter the name of the | |
| Name of New Registered Agent | | | |
| | ** | | |
| | (Florida street address |) | <u> </u> |
| New Registered Office Address: | | . Florida | |
| The state of the s | (City) | , Tionida | (Zip Code) |
| New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent | | ccept the obligations of the posi | tion. |
| Si | enature of New Registered | Agent, if changing | |

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)

Remove

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.

| X Change | <u>PT</u> | John Do | <u>oe</u> | | |
|-------------------------------|--------------|-------------|-------------|-----|--------------|
| X Remove | <u>v</u> | Mike Jo | <u>ones</u> | | NG CANCELLEI |
| X Add | <u>sv</u> | Sally Sn | nith | RET | URNED CHECK |
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | | Address |
| 1) Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 2) Change | | | | | |
| Add | | | | | |
| Remove | | | | | |
| 3) Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 4) Change | | _ | | | |
| Add | | | | | |
| Remove | | | | | |
| 5) Change | | | | | |
| Add | | _ | | | |
| Remove | | | | | |
| 6) Change | | _ | | | |
| Add | | | | | |
| _ | | | | | |

| If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) | | |
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| If an amendment provides for an exchange, reclass provisions for implementing the amendment if no (if not applicable, indicate N/A) | sification, or cancellation of issued shares, t contained in the amendment itself: | |
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| The date of each amendment(s) adoption date this document was signed. | RETURNED CHECK, if other than the |
|---|--|
| Effective date if applicable: | |
| | (no more than 90 days after amendment file date) |
| Note: If the date inserted in this block do document's effective date on the Department | bes not meet the applicable statutory filing requirements, this date will not be listed as the nt of State's records. |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) |
| ☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient | the shareholders. The number of votes cast for the amendment(s) for approval. |
| | by the shareholders through voting groups. The following statement of the group entitled to vote separately on the amendment(s): |
| "The number of votes cast for the | amendment(s) was/were sufficient for approval |
| by | " |
| | (voting group) |
| action was not required. | the board of directors without shareholder action and shareholder the incorporators without shareholder action and shareholder |
| selected, by an | president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court ciary by that fiduciary) |
| <u></u> | (Typed or printed name of person signing) |
| | President (Title of person signing) |
| | (1100 or beroom orBurne) |