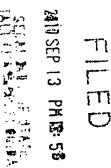
P17000003936

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of S	Status
Special Instructions to Filing Officer:	
Office Use Only	



300302553403

08/17/17--01012--017 **35.00



Amend

SEP 14 2017 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

V.

NAME OF CORPORATION: PRIME WOO	DWORK INC
DOCUMENT NUMBER: P17000003936	
The enclosed Articles of Amendment and fee in	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
ANTHONY MONICO	
PRIME WOODWORK	Name of Contact Person NC
	Firm/ Company
8751 NW 170 TERRA	E
IIIALEAII FL 33018	Address
	City/ State and Zip Code
primewoodwork@gmail.com	
E-mail address; (to	be used for future annual report notification)
For further information concerning this matter,	please call:
ANTHONY MONICO	786 608-0679
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount m	 de payable to the Florida Department of State;
\$35 Filing Fee State Oaid Drevious(i)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Ft. 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 23, 2017

ANTHONY MONICO PRIME WOODWORK INC 8751 NW 170 TERRACE HIALEAH, FL 33018

SUBJECT: PRIME WOODWORK INC

Ref. Number: P17000003936

We have received your document for PRIME WOODWORK INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 017A00017367

correction attached. Many fou

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

PRIME WOODWORK INC

TRIME WOODWORK INC.		
(Name of Corpo	oration as currently filed with the Florida Dept. of State)	
P17000003936		
(D	ocument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, FI its Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the following	ig amendment(s) to
A. If amending name, enter the new name of the	he corporation:	
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Gword "chartered." "professional association." of	word "corporation," "company," or "incorporated" or the a Corp," "Inc," or "Co". A professional corporation name must r the abbreviation "P.A."	_The new bbreviation contain the
B. Enter new principal office address, if applic		
(Principal office address MUST BE A STREET	ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE D. If amending the registered agent and/or registered agent and/or the new registered agent Agent Name of New Registered Agent	istered office address in Florida, enter the name of the	FILED PHE: 58
<u></u>	(Florida street address)	-
	(For the bir ect districts)	
New Registered Office Address:	, Florida	<u>.</u>
	(City) (Zip	Code)
New Registered Agent's Signature, if changing	Registered Agent:	
I hereby accept the appointment as registered ag	nt. I am familiar with and accept the obligations of the position.	
	Signature of New Registered Agent, if changing	-

address of each Office (Attach additional sheet Please note the officer/of P = President; V= Vico Executive Officer; CFO held. President, Treasur Changes should be note	r and/or Directs, if necessaryi lirector title by President; T= 0 = Chief Finanter, Director wo and in the following waves the corpo	tor being added: the first letter of the office title: Treasurer; S= Secretary; D= L ncial Officer. If an officer/direct ould be FTD. ing manner. Currently John Doe ration, Sally Smith is named the	Oirector; TR = Trustee; C = Chairman or Clerk; CEO = Chief for holds more than one title, list the first letter of each office is listed as the PST and Mike Jones is listed as the V. There is V and S. These should be noted as John Doe, PT as a Change.
X Change	<u>PT</u> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name 	Address
1) Change	S	 O\$VALDO CEBALLO	20560 SR 70 WEST
X Add			OKEECHOBEE, FL 34974
Remove			
2) Change			
Add			
Кепюус			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		 	

If amending or adding additional Article Attach additional sheets, if necessary). ((Be specific)
Action telemonal sneets, if necessary.	be specific,
	<u> </u>
	
	
provisions for implementing the amend	reclassification, or cancellation of issued shares, ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Here is not committed in the anichangus fixer.
	<u> </u>
	II

The date of each amendment(s) adoption:	, 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 does in document's effective date on the Department of	of meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CH	ECK ONE)
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes cast for the amendment(s) approval.
☐ The amendment(s) was/were approved by the must be separately provided for each voting	e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	idment(s) was/were sufficient for approval
by	ing group)
· ·	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
8/10/2017 Dated	
Signature / aw	Mon
	ident or other officer – if directors or officers have not been imporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
KAREN M	II ONICO
(Typed or printed name of person signing)
TREASUR	II HR II
	(Title of person signing)