P17000005426

| (Req | questor's Name) | |
|---------------------------|-------------------|-------------|
| bbA) | lress) | |
| (Add | lress) | |
| (City | //State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bus | siness Entity Nar | ne) |
| (Doc | cument Number) | , |
| Certified Copies | Certificates | s of Status |
| Special Instructions to F | Filing Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPO | DRATION: | CP Buil | DS Inc. | | |
|------------------------|--|--|--|------------|--|
| DOCUMENT NUM | P17000005426 | | | - | |
| The enclosed Article | es of Amendment and fee are su | bmitted for filing. | | | |
| Please return all corr | respondence concerning this ma | tter to the following: | | | |
| | Charles Peterson | | | | |
| | (4) | Name of Contact Person | INC. | | |
| | 4312 Coronado Parkway | Firm/ Company | | | |
| | | Address | | | |
| | Cape Coral, Fl 33904 | . 1041455 | | | |
| | City/ State and Zip Code | | | | |
| | Charlesopeterson3@yahoo.co | om | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | (0) | |
| For further informati | on concerning this matter, pleas | se call: | | E P. 3. 1. | |
| Charles Peterson | <u> </u> | at (| 471-6506 | · | |
| Name | of Contact Person | Area Co | de & Daytime Telephone No | umber | |
| Enclosed is a check t | for the following amount made | payable to the Florida Dep | artment of State: | | |
| ■ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| Ar Di | ailing Address nendment Section vision of Corporations D. Box 6327 | Ameno Divisio | Address Iment Section on of Corporations entre of Tallahassee | | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



April 23, 2020

CHARLES PETERSON 4312 CORONADO PARKWAY CAPE CORAL, FL 33904

SUBJECT: CHUCKS HANDYMANS SERVICE INC

Ref. Number: P17000005426

We have received your document for CHUCKS HANDYMANS SERVICE 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P00000086126 - C P BUILDERS, INC.

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: 520A00008449

New name - CP Builds, Inc.

Articles of Amendment to Articles of Incorporation of

orporation

Willed with the Florida Dept. of State)

| Chucks Handymans Service Inc | | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ |
|---|--------------------------|---|
| (Name of Cor | poration as currently | filed with the Florida Dept. of State) |
| P17000005426 | | |
| (| Document Number of | Corporation (if known) |
| Pursuant to the provisions of section 607.1006, tits Articles of Incorporation: | Florida Statutes, this A | Florida Profit Corporation adopts the following amendment(s |
| A. If amending name, enter the new name of | the corporation: | |
| CP BUILDS | SITAC. | The new |
| name must be distinguishable and contain the we "Inc.," or Co.," or the designation "Corp." "chartered," "professional association," or the | "Inc," or "Co". A | ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word |
| n. E. a | Z b.1 | N/A |
| B. Enter new principal office address, if appl (Principal office address MUST BE A STREE | | |
| | | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A | | N/A |
| (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| | | |
| | | |
| D. If amounting the assistance agent and/or re- | | are in Florida autor the name of the |
| If amending the registered agent and/or r new registered agent and/or the new registered. | | |
| | N/A | |
| Name of New Registered Agent | | |
| | N/A | |
| | (Florida stre | et address) |
| New Registered Office Address: | N/A | , Florida |
| | (| (Zip Code) |
| | | |
| | | |
| New Registered Agent's Signature, if changir I hereby accept the appointment as registered a | | |
| i neresy accept the appointment as registered a | scin. Tam jamanar w | un una accept the congunction of the position. |
| | Ω / Ω | |
| | 14 | |
| | Signature of New Re | gistered Agent, if changing |

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

C----lar

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 Doe | |
|-------------------------------|--------------|-------------|-----------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>\$V</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | | | |
| Ađd | | | |
| Remove | | | |
| 2) Change | · | | |
| Add | | | / |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| (Attach additional s | sheets, if necessary). (Be specific) | |
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| If an amendment | provides for an exchange, reclassification, or cancellation of issued shares. | |
| provisions for im | plementing the amendment if not contained in the amendment itself: | |
| (if not applice | able, indicate N/A) | |
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| | | • |
| | V) | |
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| - American III | | |
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| • | N/A | |
|--|---|--|
| The date of each amendment(s) ac | option: | , if other than the |
| date this document was signed. | N/A | |
| Effective date if applicable: | N/A | |
| <u> </u> | (no more than 90 days after amendment file d | ate) |
| Note: If the date inserted in this bl document's effective date on the De | ock does not meet the applicable statutory filing requirempartment of State's records. | nents, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ado action was not required. | pted by the incorporators, or board of directors without sha | reholder action and shareholder |
| ☐ The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes cast for the fficient for approval. | amendment(s) |
| | roved by the shareholders through voting groups. The followard voting group entitled to vote separately on the amendo | |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | |
| by | N/A | |
| , | (voting group) | |
| selected appoint | rector, president or other officer – if directors or officers hat, by an incorporator – if in the hands of a receiver, trustee, and fiduciary by that fiduciary) Charles Peterson (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |