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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: CREATIVE MOD	DERN HOMES CORP
DOCUMENT NUMBER: P17000006955	
The enclosed Articles of Amendment and fee are su	abmitted for filing.
Please return all correspondence concerning this mat	tter to the following:
LUCIANA MELO	
	Name of Contact Person
	Firm/ Company
3150 N COURSE DRIVE AP	P 201-42
POMPANO BEACH, FL 330	Address 069
	City/ State and Zip Code
LUCIANA@IMPERIALINSURAN	NCEGROUP.COM
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter, please	se call:
LUCIANA	754 368-0178
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
■ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

CREATIVE	MODERN	HOMES	CORP

(Name of Cornorati	ion as currently filed with the Flor	ida Dant, of Stata)
P17000006955	ion as currently med with the Pion	ida Dept. of State)
(Docur	nent Number of Corporation (if know	vn)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Corpo	ration adopts the following amendment(s) t
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	"." "Inc." or "Co". A professional	"incorporated" or the abbreviation
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	OX)	
<u></u>	<u> </u>	
	<del></del>	···
	<del></del>	<del></del>
<ul> <li>If amending the registered agent and/or register new registered agent and/or the new registered</li> </ul>	red office address in Florida, enter office address:	the name of the
name by two reguleres agem		
-	(Florida street address)	<del></del>
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	istered Agent:	
hereby accept the appointment as registered agent.	I am familiar with and accept the ob	ligations of the position.
Signe	ature of New Registered Agent, if cha	moina

## 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 = Trustec; 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	<u>V</u>	Mike Jones			
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
Change	D	WIVERSON P DA COICEICAO	815 SPRING CIRCLE AP 206		
X Add			DEERFIELD BEACH, FL 33441		
Remove					
2) Change					
Add					
Remove					
3 ) Change		_			
Add					
Remove					
4) Change					
Add					
Remove					
5) (Thomas					
5) Change Add					
Remove					
6) Change					
Add					
Remove					

If amending or adding as Attach additional sheets, i	if necessary). (Be $s_i$	pecific)			
	<u>+</u>				
···-					
		<del></del> -	<del></del>		
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f an amendment provide	<u>es for an exchange, r</u>	<u>eclassification, or</u>	cancellation of iss	ued shares,	
provisions for implementation (if not applicable, inc	<u>iting the amendment</u> dicate N/4)	t if not contained i	n the amendment	<u>itself:</u>	
(y nor uppricative, in					
					·
	-				
****			<del>.</del> .		

The date of each amendment(s) adoption: date this document was signed.	_, if other than th
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	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 amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
07/93/2017	
Dated	
and the grade of	
Signature (By a director, president or other officer – if directors or officers have not been	-
selected, by an ineprporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
ARTUR FIORAVANTE	
(Typed or printed name of person signing)	<del></del>
tresident	<del>-</del>
(Title of person signing)	