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EIVISION OF CORPORATION

MAY 31 2017 C MCHAIR

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TRAMME	ELL STUCCO, INC.					
DOCUMENT NUMBER: P17000018983						
The enclosed Articles of Amendment and for						
Please return all correspondence concerning	g this matter to the following:					
MICHAEL J. KIERZ	ZYNSKI					
	Name of Contact Person					
KIERZYNSKI & AS	KIERZYNSKI & ASSOCIATES, C.P.A., P.A.					
	Firm/ Company					
5143 COMMERCIA	• •					
	Address					
SPRING HILL, FL	34606					
	City/ State and Zip Code					
MARYBETH@TAMPAB	AY.RR.COM					
E-mail address:	(to be used for future annual report notification)					
For further information concerning this matter						
MICHAEL J. KIERZYNSKI	at (<u>352</u>) <u>597-2800</u>					
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 \$35 Filing Certificate of a						
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					

MILE OF SEPTIMES O

Articles of Amendment to Articles of Incorporation of



TRAMMELL STUCCO, INC.

	ion as currently filed with the Florida Dept. of State)
17000018983	·
(Docum	nent Number of Corporation (if known)
arsuant to the provisions of section 607.1006, Florida Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(
If amending name, enter the new name of the co	orporation:
	The new corporation," "company," or "incorporated" or the abbreviation now "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>)
If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(Florida street address) , Florida

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 Do	<u>e</u>	
X Remove	¥	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	VP	_	LARRY TRAMMELL	7414 S. FORTE EVANS POINT
X Add				HOMOSASSA, FL 34446
Remove				
2) Change	 	_		
Add				
Remove				
3) Change		- -		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Damaya				

Attach additional s	ding additional Art heets, if necessary).	(Be specific)				
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f an amendment p	orovid <u>es for an excl</u>	ange, reclassifi	ication, or cance	llation of issued	shares,	
provisions for imp	plementing the ame ble, indicate N/A)	ndment if not c	ontained in the	amendment itse	<u>lf:</u>	
(у пог иррпси	bie, maicule WA)					
					<u></u>	
· · · · · · · · · · · · · · · · · · ·						
			<u>-</u>			

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.'	•	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date repartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
☐ The amendment(s) was/were ac action was not required,	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	opted by the incorporators without shareholder action and shareholder	
05/23/201 Dated	7	
Signature X	Ly Lul	
(By and selected	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	SONNY K. TRAMMELL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	