PIDDRA

(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Da	ocument Number)	-
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pecial Instructions to	Filing Officer:	

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R. WHITE



COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Custom	Carpentry and Design, Inc.	
DOCUMENT NUMBER: P17000C	>26236	
The enclosed Articles of Amendment and fee are su	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Stever	Name of Contact Person	
Custem Cz	Firm/ Company	
524 SW	Address	
Part St L	City/ State and Zip Code	
E-mail address: (to be u	entrydesign Eatlack. Carrused for future annual report notification)	`
For further information concerning this matter, plea	ase call:	
Steven Burk	at (772) 579 0241 Area Code & Daytime Telephone Number	
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 □\$43.75 Filing Fee & Certificate of Status	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

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Custam Czrpentn	
(Name of Corporation	n as currently filed with the Florida Dept. of State)
PITOC	00026234
(Docume	ent Number of Corporation (if known)
rsuant to the provisions of section 607.1006, Florida S Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
If amending name, enter the new name of the cor	poration:
	The new
me must be distinguishable and contain the word Corp.," "Inc.," or Co.," or the designation "Corp," ord "chartered." "professional association," or the a	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDI	<u>RESS</u>)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0
If amending the registered agent and/or registere new registered agent and/or the new registered o	
Name of New Registered Agent	<u> </u>
	(Florida street address)
Name Provintered Office Address	, Florida
New Registered Office Address:	, Florida (Zip Code)
ew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept the obligations of the position.
Signa	ture of New Registered Agent, if changing

f amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and ddress of each Officer and/or Director being added:

Attach additional sheets, if necessary)

xample:

lease note the officer/director title by the first letter of the office title:

' = 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 eld. 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 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, Aike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT	John Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	ones		
X Add	<u>sv</u>	Sally S	<u>mith</u>		
ype of Action Check One)	<u>Title</u>		<u>Name</u>		Address
) Change	<u> </u>		LAURIE	A DAVIS	524 SNINDIA
× Add					524 SN Indian Key Ar Part St Lucie FL 34986
Remove					34986
) Change					
Add					
Remove					
) Change			-		
Add					
Remove					· · · · · · · · · · · · · · · · · · ·
) Change					
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Add					
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If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
A second contraction of the contraction of the changes	
	 -
	·
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(g not approcaute, marcule way)	
	·
	

The date of each amendment(s) adoption: 1 January 2018, if other that
ate this document was signed.
Effective date if applicable: 1 January 2018
(no more than 90 days after amendment file date)
lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed accument's effective date on the Department of State's records.
doption of Amendment(s) (<u>CHECK ONE</u>)
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'''
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.
Dated 12 January 2018
Signature 4 4
(By a director, president or other officer - if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
(Typed or printed name of person signing)
Describer 1

(Title of person signing)