P17000051813

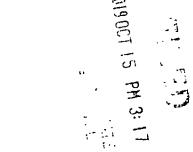
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: A -PLUS FRAMI!	NG OF NWF INC				
DOCUMENT NUM	1BER: P17000051813					
	es of Amendment and fee are su	bmitted for filing.				
Please return all cor	respondence concerning this ma	tter to the following:				
	TELENA COWARD					
Name of Contact Person						
	A-PLUS FRAMING OF NW	FRAMING OF NWF INC				
, Firm/ Company						
	297 W BOWERS AVENUE					
		Address				
	CRESTVIEW, FLORIDA 32	2536				
, Sa		City/ State and Zip Cod	e			
AP	LUSFRAMINGOFNWFINC@	GMAIL.COM				
	-	sed for future annual report	notification)			
		·	,			
For further informat	ion concerning this matter, pleas	se call:				
TELENA COWARD		850 at (902-4619			
Nam	e of Contact Person	at (850) 902-4619 Area Code & Daytime Telephone Number				
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address			Address			
Amendment Section		Amendment Section				
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building				
Tallahassee, FL 32314		2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

A- PLUS FRAMING OF NWF INCORPORATED (Name of Corporation as currently filed with the Florida Dept. of State) P17000051813 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent tFlorida New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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.

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	· Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	DOUGLAS MONTFORD	4243 KNAPNOB STREET
Add			HOLT, FL 32564
X Remove			
2) Change	O	DALTON BAILEY	4251 Cooper Lane
Add			Holt, FL 32564
X Remove			
3) Change	O	SHAUN BAILEY	4251 Cooper Lane
Add			Holt, FL 32564
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			 .
6) Change			<u> </u>
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
	_	
If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancell idment if not contained in the a	lation of issued shares, mendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable:</u>	0/1/2019	
Effective date if appreciate.	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date. Department of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(e sufficient for approval.	s)
	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	ir
10/09/2 Dated	019	
Signature		
séle	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other coulointed fiduciary by that fiduciary)	
	TELENA COWARD	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	