P18000020374

(Re	equestor's Name)	
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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Custom Cast & Ch	rome, Inc.		
DOCUMENT NUME	BER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	Mickey J Parker			
		Name of Contact Person	1	
	Pension Transfer Advisors, LLC			
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company		
	19016 West 99th Terr			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Address		
	Lenexa KS 66220			
		City/ State and Zip Code	2	
micke	y@pensiontransfers.net			
.	E-mail address: (to be us	ed for future annual report	notification)	
For further information	n concerning this matter, pleas	e call:		
Mickey Parker		at (832	532-6830 Ext 101	
Name of Contact Person Area Code & Daytime Telephone N		de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	tly filed with the Flo	rida Dept. of State)	
P18000020374			
(Document Number of	of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corp	poration adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporation:			
Cobucci Investments, Inc.			The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professione		bbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A		
	A-11-A-2		=
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		
		(D)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres		er the name of the	CIP.
Name of New Registered Agent N/A			
			•
(Florida st	treet address)		
(Florida st <u>New Registered Office Address:</u>	treet 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:	, unu bui	ny omin, or as an Aaa.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

√A	ending or adding additional Articles, enter change(s) here: 'additional sheets, if necessary). (Be specific)	
1.0		
		
-		
		·····
		
<u>provi</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares, isions for implementing the amendment if not contained in the amendment itself: if not applicable, indicate N/A)	
(i		
(<i>i</i>		

	N/A	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.	•	•
N/A		
Effective date if suplicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this dat partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.)
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	mž
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder	r
action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	-2-2018	
Signature /	ill of the	
(By a d	rector, president or other officer - if directors or officers have not been	
	1, by an incorporator - if in the hands of a receiver, trustee, or other court	.
	od fiduciary by that fiduciary)	1
	Richard S Incabucci	
	(Typed or printed name of person signing)	
	Director	
	(Title of nerson signing)	