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SEGNETZSE GESTATE TALLAHASSEE, FLORIDA

AUG 2 3 2018 S. YOUNG

COVER LETTER

٠.,

NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Address For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee **∠**\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

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

(Additional Copy is enclosed)

Articles of Amendment

to
Articles of Incorporation

DAG Carpentry	COVE	ovation	
(Name of Corporation	as currently filed	with the Florida Dept. of Stat	<u>ie</u>)
118 NDDD 33	434		
(Docume	nt Number of Corp	oration (if known)	
Pursuant to the provisions of section 607,1006. Florida Sits Articles of Incorporation:	Statutes, this <i>Florid</i>	a Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of the corp	poration:		
			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the al	"Inc," or "Co".	ompany," or "incorporated" A professional corporation na	or the abbreviation ne must contain the
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDR	<u>(E33</u>)		<u> </u>
			国星而
			ある F
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	'n		爺 二四
(mutting uturess MAT BE A POST OFFICE BOX.	′ —		
			<u> </u>
		·	7
D. If amending the registered agent and/or registered	d office address in	Florida, enter the name of the	,
new registered agent and/or the new registered of		THE HALL CHICK HALLE OF VILV	<u>:</u>
Name of New Registered Agent			
		· -	
	(Florida street ada	ress)	
Van Burintan of Minn Address		111 · 11	
New Registered Office Address:	(City)	, I lorida	(Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. L.		nd accept the oblivations of the	position
Thereby decept the appointment as regimered agent.			
-			
Signat	ture of New Registe.	red 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 <math>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.

Mike Jones, V as Rei Example:	nove, and Sally Smith	i, SV as an Add.	
X Change	<u>PT</u> <u>John I</u>	loc	
X Remove	<u>V</u> <u>Mike</u>	Jones	
<u>X</u> Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VPIT	George Knopp	e 3165 Hailow Rox
Add	,	, ,	Chado, FC
Remove			<u> </u>
2) Change	VPIT	David Refer	3133 Heiliam Rat
Add			Driedo FC
Remove			<u> </u>
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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f an amendment provides for an exchange, reclassification, or cancellation of issued sha	ares.
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
(g IP)	
	
	-,

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 block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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	
hy	
(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 8/10/2018	
Signature (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)	
Describent	
(Title of person signing)	