P18000087056

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COVER LETTER.

TO: Amendment S Division of Co		,	
NAME OF CORPO	RATION: THRIFT LOG HOMES I	NC	
DOCUMENT NUMB	BER: P18000087056		
The enclosed Artic	les of Amendment and fee are so	ubmitted for filing.	
Please return all co	rrespondence concerning this mat	ter to the following:	
	DAVID J THRIFT		
	-	Name of Contact Person	
	THRIFT LOG HOMES INC		
		Firm/ Company	
	13407 N SR 121		
		Address	
	MACCLENNY, FL 32063		
		City/ State and Zip Code	
	E-mail address (to be us	sed for future annual report no	tification)
For further information	tion concerning this matter, please	call:	
DAVID J THRIFT		at (904) 259-290	00
	Name of Contact Person		de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made pa	ayable to the Florida Departme	ent of State:
X \$35 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		ment Section
	Division of Corporations P.O. Box 6327		n of Corporations entre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

THRIFT LOG HOMES INC		
(Name of Corporation as currently filed	with the Florida Dept. of State)	
P18000087056		
(Document Number of Corpo	oration (if known))	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> to its Articles of Incorporation:	da Profit Corporation adopts the following a	amendment(s)
A. If amending name, enter the new name of the corporation:		
THRIFT LUMBER INC		_ The new
name must be distinguishable and contain the word "corporation," "comparation," or Co.," or the designation "Corp," "Inc," or "Co". A professional confidence of the abbreviation "P.A."	ny," or "incorporated" or the abbreviation "Cor prporation name must contain the word	rp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
· · · · · · · · · · · · · · · · · · ·		
		-
O. E. L		1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1
		7: 2:
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D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the	
Name of New Registered Agent:		
(Flonda	street address)	
New Registered Office Address:	, Florida	0 11
(Cit)	i) (Zip	Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with an		
Signature of New Registered	Agent, if changing	
Chack if applicable		

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

THRIFT LOG HOMES INC

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>	<u>John Doe</u>	
X Remove	V	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
3) Change			
Add	****		
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			_

Ε.	THRIFT LOG HOMES INC If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	ATX1
	(Attach additional streets, it necessary). (Be specific)	
_		
_		
F.	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)	
_		
		_
_		

THRIFT LOG HOMES INC , if other than the 6/1/2020 The date of each amendment(s) adoption: date this document was signed. 6/1/2020 Effective date if applicable: (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 will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) X The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. 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 (voting group) 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) DAVID J THRIFT (Typed or printed name of person signing) PRESIDENT

(Title of person signing)