## P18000093887

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO          | DRATION: ALL AMERICAN  | HOUSING OF TALLAH   | ASSEE INC   |
|------------------------|--|---|---|
|                        | 1BER: P18000093887   |   |   |
|                        | es of Amendment and fee are sul  | bmitted for filing.   |   |
| Please return all corr | respondence concerning this man  | tter to the following:  |   |
|                        | JUSTIN DANIEL KILLEBR  | EW  |   |
|                        |  | Name of Contact Person  | 1)  |
|                        | ALL AMERICAN HOUSING   | G OF TALLAHASSEE IN   | С   |
|                        | MILE.  | Firm/ Company   |   |
|                        | 9143 TRACY WAY   |   |   |
|                        | •  | Address   | - · · · · · · · · · · · · · · · · · · ·   |
|                        | PANAMA CITY FL 32405   |   |   |
|                        |  | City/ State and Zip Cod   | c   |
|                        | jdk6069@gmail.com  |   |   |
|                        | E-mail address: (to be us  | ed for future annual report                                       | notification)   |
| For further informati  | on concerning this matter, pleas   | se call:  |   |
| JUSTIN D KILLEBREW     |  | at (  | 541-8965  |
| Name of Contact Person |  | Area Co   | de & Daytime Telephone Number   |
| Enclosed is a check    | for the following amount made p  | payable to the Florida Depa                                       | artment of State:   |
| S35 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)    |
| Ar<br>Di<br>P.G        | nendment Section vision of Corporations D. Box 6327 Ilahassee, F1, 32314 | Amend<br>Divisio<br>The Co  | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

| ( <u>Name</u>   | of Corporation as curren        | tly filed with the Florida Dept. of State)   |  |  |
|---|---------------------------------|--|--|--|
| P18000093887  |                                 |  |  |  |
|   | (Document Number                | of Corporation (if known)  |  |  |
| Pursuant to the provisions of section 607 its Articles of Incorporation:  | .1006, Florida Statutes, thi    | s Florida Profit Corporation adopts the following amendment(s) to  |  |  |
| A. If amending name, enter the new n  | ame of the corporation:         |  |  |  |
| N/A   |                                 | The new  |  |  |
| name must be distinguishable and contain<br>"Inc.," or Co.," or the designation "(<br>"chartered," "professional association, | Corp," "Inc." or "Co".          | "company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word |  |  |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )             |                                 | 9143 TRACY WAY   |  |  |
|   |                                 | PANAMA CITY FL 32405   |  |  |
|   |                                 |  |  |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                                       |                                 | 9143 TRACY WAY   |  |  |
|   |                                 | PANAMA CITY FL 32405   |  |  |
| D. If amending the registered agent an new registered agent and/or the ne   | nd/or registered office address | dress in Florida, enter the name of the  |  |  |
|   | HICTIALD MILLIDDEN              |  |  |  |
| Name of New Registered Agent  | 9143 TRACY WAY                  | rect address)  Florida 32405   |  |  |
|   | (Florida s                      | treet address)   |  |  |
| New Registered Office Address:  | PANAMA CITY                     | Florida 32405  |  |  |
|   |                                 | (City) (Tap Code)  |  |  |
| New Registered Agent's Signature, if c  | hanging Registered Ages         | *•   |  |  |
| hereby accept the appointment as regist   | tered agent. I am familiar      | vith and accept the obligations of the position.   |  |  |

Signature of New Registered Agent, if changing

Check if applicable

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

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>    | John Doc           |                      |
|-------------------------------|--------------|--------------------|----------------------|
| X Remove                      | <u>V</u>     | Mike Jones         |                      |
| <u>X</u> Add                  | <u>sv</u>    | Sally Smith        |                      |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>        | <u>Addres</u> s      |
| 1) Change                     | P            | JERRY T KILLEBREW  | 3109 RED LION DR     |
| Add                           |              |                    | VALRICY FL 33596     |
| X Remove                      |              |                    |                      |
| 2) X Change                   | Р            | JUSTIN D KILLEBREW | 9143 TRACY WAY       |
| Add                           |              |                    | PANAMA CITY FL 32405 |
| Remove 3) Change              | VP           | JUSTIN D KILLEBREW |                      |
| Add                           |              |                    | 3109 RED LION DR     |
| X Remove                      |              |                    | VALRICO FL 33596     |
| 4) Change                     |              | <u> </u>           | _                    |
| Add                           |              |                    |                      |
| Remove                        |              |                    |                      |
| 51 Change                     |              |                    | <u> </u>             |
| Add                           |              |                    |                      |
| Remove                        |              |                    |                      |
| 6) Change                     |              |                    |                      |
| Add                           |              |                    |                      |
| Remove                        |              |                    | -                    |

| f amending or adding additional Arti<br>Attach additional sheets, if necessary). | (Be specific)        |                         |                                       |             |
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| f an amendment provides for an exch  | ange, reclassificati | on, or cancellati       | ол of issued share                    | 5.          |
| provisions for implementing the ame  | ndment if not cont   | <u>ained in the ame</u> | ndment itself:                        |             |
| (if not applicable, indicate N/A)  |                      |                         |                                       |             |
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|   | JUNE 2: 2021   |                                     |
|---|--|-------------------------------------|
| The date of each amendment(s) add date this document was signed.                      | option:  | , if other than the                 |
| JUNE<br>Effective date <u>if applicable</u> ;   | 2, 2021  |                                     |
|   | (no more than 90 days after amendment file date)   |                                     |
| <b>Note:</b> If the date inserted in this blo<br>document's effective date on the Dep | ock does not meet the applicable statutory filing requirements. partment of State's records.   | this date will not be listed as the |
| Adoption of Amendment(s)  | (CHECK ONE)  |                                     |
| The amendment(s) was/were adop action was not required.                               | oted by the incorporators, or board of directors without sharehol  | der action and shareholder          |
| ☐ The amendment(s) was/were adop<br>by the shareholders was/were suff                 | oted by the shareholders. The number of votes east for the amer  | ndment(s)                           |
| ☐ The amendment(s) was/were appromust be separately provided for e                    | oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendment  | statement<br>(s):                   |
|   | or the amendment(s) was/were sufficient for approval   |                                     |
| by N/A  | "  |                                     |
|   | (voting group)   |                                     |
| selected,   | rector, president or other officer – if directors or officers have no<br>by an incorporator – if in the hands of a receiver, trustee, or other<br>diductory by that fiductory) | ot been<br>her court                |
| 11  | ERRY T KILLEBREW   |                                     |
| _   | (Typed or printed name of person signing)  |                                     |
| p   | RESIDENT   |                                     |
| _   | (Title of person signing)  |                                     |