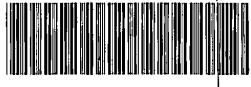
P190000 69525

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: V&G Netal Framing Inc DOCUMENT NUMBER: _____P190000 69525 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Victor Garrido Funes

Name of Contact Person

V & G Metal Framing Inc

Firm/Company 4534 27th ST SW Address Lehigh Acres, FL 339773

City/ State and Zip Code Victor funesic @ icloud, com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Victor Garrido Funes at (239) 565-4082

Area Code & Daytime Telephone Number 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 Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed)

Mailing Address

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

Articles of Amendment to Articles of Incorporation of

V & G METAL FRAMING INC

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4:	,		

(Name of Corporation as currently filed with the Florida Dept. of Sta	ite)
P19000069525	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts thits Articles of Incorporation:	e following a
A. If amending name, enter the new name of the corporation:	
VÀG DRYWALL INC	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation neword "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	<u> </u>
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 th	
new registered agent and/or the new registered office address:	<u></u>
Name of New Registered Agent	
There of the the state of the s	
(Florida street address)	
	,
New Registered Office Address:, Florid	(Zip Cod
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	nacition
thereby accept the appointment as registered agent. I am jumitial with and accept the obligations of the	position:
Delinger	
Signature of New Registered Agent, if changing	

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V= Vice F Executive Officer; CFO = held. President, Treasurer Changes should be noted	ind/or Difinecession if necession title President, Chief Fig., Directo in the follows the co	ector being added: (y) by the first letter of the office T = Treasurer; S = Secretary mancial Officer. If an office would be PTD. wwing manner. Currently Je poration, Sally Smith is nar	e title: y; D= Director; TR= Tri er/director holds more th ohn Doe is listed as the P.	irector being removed and t ustee; C = Chairman or Cleri an one title, list the first lette ST and Mike Jones is listed as nould be noted as John Doe, F
X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike_Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change	-			
Add Remove				
2) Change Add				
Remove 3) Change Add				
Remove 4) Change Add				
Remove 5) Change				
Add Remove				
6) Change Add Remove				

(Attac	ending or adding additional Articles, enter change(s) here: h additional sheets, if necessary). (Be specific)	
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<u> </u>		
		
prov	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)	
		<u> </u>
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		<u> </u>
		-
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The date of each amendment(s) date this document was signed.	adoption:,
Effective date if applicable:	09/17/19
Effective date it applicable.	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be be be be because of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes can	et for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/were acation was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated	09/17/2019
selec	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	Victor Garrido Funes
	(Typed or printed name of person signing)
	President
	(Title of person signing)