## P11000052473

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2021 OCT 14 PH 4: OF STATE SECRETARY OF STATE

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJI Name	ECT: We top Part I man
ĐOCU	MENT NUMBER: 14000052473
Please	return all correspondence concerning this matter to the following:
C la	of Contact Person
W	poten Built. Inc.
100	· Wisteria Drive
City/Si	tate and Zip Code
E-mai	Laddress: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
	$\frac{1000 \text{ Name of Contact Person}}{\text{Name of Contact Person}} = \frac{1000 \text{ At } \frac{1000 \text{ At } \frac{1}{2} + \frac{1}{2} \frac{1}{2} \frac{1}{2}}{\text{Area Code & Daytime Telephone Number}}$

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation υf

FILED

2021 OCT 14 PH 4: 06

Wooten Built, Inc.			
(Name of Corporation as current	ly filed with the Florida Dept. 65 STATE MALE AHASSET, FL		
P19000082473			
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
	The new		
name must be distinguishable and contain the word "corporation," ' "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name musi Contain the word		
B. Enter new principal office address, if applicable:	106 Wisteria Dr		
(Principal office address MUST BE A STREET ADDRESS)	Longwood, FL 32779		
C. Enter new mailing address, if applicable:	106 Wisteria Dr		
(Mailing address MAY BE A POST OFFICE BOX)	Longwood, FL 32779		
D. If amending the registered agent and/or registered office ad-	dress in Florida, enter the name of the		
new registered agent and/or the new registered office address	<u>ss:</u>		
Name of New Registered Agent			
·	areet address)		
New Registered Office Address: 106 Wisteria Dr. Longwo	(City) , Florida 32779 (Zip Code)		
	(City)		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the position.		
Signature of New	Registered Agent, if changing		
Signame of the			
Signature of New	Registered Agent, if changing		

Check if applicable

<sup>☐</sup> 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)

Example:

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.

X Change	PT	John Doe	
X Remove	$\underline{Y}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change		Clay Wooten	106 Wisteria Dr. Longwood, FL 32
Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change	<u> </u>		
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 shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	ttach additiona	I sheets, if necessary).	(Be specific)				
provisions for implementing the amendment it not contained in the amendment risers.							_
f 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)							
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	(if not app	licable, indicate N/A)					
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The date of each amendment(s) ad	10/14/2021	, if other than the
date this document was signed.	pp	
Effective date <u>if applicable</u> :		imendment file date)
	(no more than 90 days after t	imendment file date)
Note: If the date inserted in this bl document's effective date on the Dep		y filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	ited by the incorporators, or board of direc	ctors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were suf	nted by the shareholders. The number of vificient for approval.	rotes cast for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	oved by the shareholders through voting grach voting group entitled to vote separate	groups. The following statement ely on the amendment(s):
"The number of votes cast	or the amendment(s) was/were sufficient	for approval
bv	(voting group)	<u></u> ."
<i>,</i>	(voting group)	
10/14/2021 Dated	OocuSigned  Car La  C328E9CB2	ati
Signature		
(By a di selected	rector, president or other officer – if direct, by an incorporator – if in the hands of a defiduciary by that fiduciary)	tors or officers have not been receiver, trustee, or other court
	Clay Wooten	
	(Typed or printed name of per-	son signing)
	President	
	(Title of person signing)	