P20 000048033

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200368336872

05.121.21 -- 31011--017 ***35.00

21 WH21 MH 8: 25



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: NAVARRE FRAM	MING INC	<u> </u>		
DOCUMENT NUME			2000000		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	NICHOLAS FANELLA				
	<u> </u>	Name of Contact Person			
	NR FANELLA & CO INC				
	·	Firm/ Company			
	434 Tanglewood Dr. TANGL	EWOOD DR			
		Address	 -		
	FORT WALTON BEACH FI	L 32547			
		City/ State and Zip Code	:		
	NFANELLA@COX.NET				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
NICHOLAS FANELI	.A	at (
Name (of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 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)		
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassee, 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 to Articles of Incorporation of

NAVARRE FRAMING INC

(Name of Corporation as currently filed with the Florida Dept. of State)	
P20000048033	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation:	ring amendment(s) t
A. If amending name, enter the new name of the corporation:	The second
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevia "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must cont "chartered," "professional association." or the abbreviation "P.A."	The new tion "Corp.," tain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
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 the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
(Ellinau Sirtei daaress)	
New Registered Office Address:, Florida, City)	ip Code)
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 position	50 50
Signature of New Registered Agent, if changing	_ 릴 #
Check if applicable	¥; 2.5
☐ 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.

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	VP	GABRIEL RECILLAS	8409 LAREDO STREET
X Add			NAVARRE FL 32566
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

<u>amenum</u>	or adding add	litional Arti	cles, enter c	hange(s) her	<u>'e</u> :			
ttach <i>addit</i>	ional sheets, if i	necessary).	(Be specific	.)	_			
<u>-</u>								
	-							
								-
								•
			-					
·								
								
								-
						<u></u>		
an amend	ment provides	for an exch	ange, reclas	sification, o	<u>cancellation</u>	of issued sha	res.	
<u>if not a (if not a)</u>	for implementi applicable, indic	<u>ing the amer</u> cate N/A)	<u>aament II no</u>	<u>or contained</u>	in the amen	iment itself:		
(9)	7,7							
			.					
		•						
								-

The date of each amendment(s) ad date this document was signed.	option:, if other than the
Effective date if applicable:	
enective date <u>it appressive</u> .	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloodocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as thartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were adopaction was not required.	ted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast for the amendment(s) leient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	[^] .
	(voting group)
JUNE 18, 2 Dated	121
Signature /	Touto Medital
selected	by an incorporator – if in the hands of a receiver, trustee, or other court diductary)
,	LFONSO RECILLAS
-	(Typed or printed name of person signing)
Ĭ	RESIDENT

(Title of person signing)