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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Safety Harbor Cabi	net Depot, Inc.			
	BER: P21000025231	<u> </u>			
	of Amendment and fee are sub	omitted for filing.			
Please return all corre	espondence concerning this mat	tter to the following:			
	London L. Bates, Esquire				
		Name of Contact Person			
	BATES WALLACH				
		Firm/ Company	-		
	P. O. Box 1213				
	Address				
	Dunedin, FL 34697				
	City/ State and Zip Code				
	I CD . W.H. I	•			
	London@BatesWallach.com	sed for future annual report			
For further informati	on concerning this matter, pleas	se call:	734-8700		
Name of Contact Person		at (Area Co	de & Daytime Telephone Number		
	or 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

Safety Harbor Cabinet Depot, Inc.				
(Name of Corporation as curre	ntly filed with the Flo	orida Dept. of State)		
P21000025231				
(Document Numbe	r of Corporation (if kn	own)		
Pursuant to the provisions of section 607.1006, Florida Statutes, the its Articles of Incorporation:	nis <i>Florida Profit Corp</i>	poration adopts the following	ng amendment	(s) to
A. If amending name, enter the new name of the corporation:				
Safety Harbor Cabinet Company, Inc.			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.2"	A professional corp		ion "Corp.,"	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
,				
			027	~2
C. Enter new mailing address, if applicable:			2021 NUG 35	, <u>g</u> ,
(Mailing address MAY BE A POST OFFICE BOX)			<u>ယ်</u> — — .	هزو
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D. If amending the registered agent and/or registered office a		er the name of the	1	
new registered agent and/or the new registered office address	ess:			
Name of New Registered Agent			_	
(Florida	street address)			
New Registered Office Address:		, Florida		
	(City)	(Zip	Code)	
New Registered Agent's Signature, if changing Registered Age	ent:			
I hereby accept the appointment as registered agent. I am familia		obligations of the position.		
Signature of New	v Registered Agent, if c	 changing	_	
Check if applicable				
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1	1) (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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jos	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<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				

f amending or adding additional Ai Attach additional sheets, if necessary)). (Be specific)			
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		-		
an amendment provides for an exc provisions for implementing the am	change, reclassificatio	n, or cancellation o	f issued shares,	
(if not applicable, indicate N/A)	ienument ii not contai	med in the amenum	ent itseit:	
71				
				
		<u>-</u>		
				
				

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	· · · · · · · · · · · · · · · · · · ·	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder act	ion and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment ufficient for approval.	(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ient
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Signature(By a d	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other couted fiduciary by that fiduciary)	
	Ronnie C. Wheelock	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	