## P210000 28218

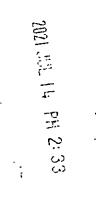
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

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NAME OF CORPO	RATION: AMERICA BUILT	RIGHT, INC			
DÖĞÜMENT NUM	BER: P21000028218				
The enclosed Article.	s of Amendment and fee are sul	omitted for filing.			
Please return all corre	espondence concerning this mat	tter to the following:			
	PAUL DZHUGA				
		Name of Contact Persor	1		
		Firm/ Company	-		
	321 MANATI AVE				
564th	· · · · · · · · · · · · · · · · · · ·	Address			
	NORTH PORT, FL 34287				
	City/ State and Zip Code				
	MIGASHKIN@YAHOO.COM				
	E-mail address: (to be used for future annual report notification)				
For further information	on concerning this matter, pleas	e call:			
PAUL DZHUGA		at (	_) 275-5261		
Name Name	of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made p	payable to the Florida Depa	urtment of State:		
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 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 Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

N/A (Name of Corporation as currently filed with the Florida Dept. of State) N/A (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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) New Registered Office Address: , Florida (City) (Zip 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. 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)

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	<u>John Doe</u>		
X Remove	$\underline{\mathbf{V}}$	Mike Jone	<u>es</u>	
X Add	<u>SV</u>	Sally Smit	<u>th</u>	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	<u>Same</u>	<u>Addres</u> s
1) Change	V		OHN DZHUGA	321 MANATI AVE
X Add amr Remove				NORTH PORT, FL 34287
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

1.	ch additional sheets, if necessary). (Be specific)
/A	·
If ar	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pre	ovisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
'A	
<u> · </u>	

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•	07/07/2021		
The date of each amendment(s) addate this document was signed.	option:		, if other than the
07/07	/2021		
Effective date <u>if applicable</u> :		<del></del>	
	(no more than 90 days after an	nendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory artment of State's records.	filing requirements, this of	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were adopaction was not required.	ted by the incorporators, or board of direct	tors without shareholder ac	ction and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of volicient for approval.	otes east for the amendmen	n(s)
must be separately provided for e	oved by the shareholders through voting grach voting group entitled to vote separately or the amendment(s) was/were sufficient for	y on the amendment(s):	ment
by		••	20:
<u> </u>	(voting group)	,	21.
•			שור
07/07/2021			2021 JUL 14
Dated	<del></del>		
V			<del>-</del>
Signature	The state of the s		
selected,	ector, president or other officer if director by an incorporator if in the hands of a re d fiduciary by that fiduciary)		
F	AUL DZHUGA		
_	(Typed or printed name of person	n signing)	_
р			

(Title of person signing)