

| (Requestor's Name) |
|---|
| |
| (Address) |
| , , , |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Queinoes Entry Name) |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| |
| Special Instructions to Filing Officer |
| |
| |
| |
| |
| |
| |
| |
| |

Office Use Only



200434624212

08/14/24--01015--016 **35.00

SECRETARY OF STATE

COVER LETTER

TO: Amendment Section

| Division of Corpora | tions | | |
|--|---|--|--|
| NAME OF CORPORA | TION: 1:A | ustom Dock | s Inc |
| | r: <i></i> | 20439 | |
| The enclosed Articles of | Amendment and fee are su | bmitted for filing. | |
| Please return all correspo | ondence concerning this ma | tter to the following: | |
| | Anthony 5 | Name of Contact Person | |
| | TIA Cuch | on Docks Two | |
| | I:I COST | om Docks Inc Firm/Company | - |
| | | | |
| | 13 0 33 LAM | cer Rd Address | |
| | | | |
| _ | ייח פמיוקכ | Fl 34610 City/ State and Zip Code | <u> </u> |
| _ | E-mail address: (to be us | Hard ACU Stom dock sed for future annual report | S.COM notification) |
| For further information c | concerning this matter, pleas | se call: | |
| Anthony 5 | Sulinski | at (727 | 243-4492 de & Daytime Telephone Number |
| Name of | Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for the | he 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) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address | | | Address |
| Amendment Section | | Amendment Section | |
| Division of Corporations P.O. Box 6327 | | Division of Corporations The Centre of Tallahassee | |
| Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 | |

Tallahassee, FL 32303

Articles of Amendment

to
Articles of Incorporation of

| Tand A Custom Docks | Inc |
|--|---|
| _ | y filed with the Florida Dept. of State) |
| <i>P2200020439</i> | |
| (Document Number of | f 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: | |
| TAND A CUSTOM Decks And Docks | Inc The new |
| name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A." | company," or "incorporated" or the abbreviation "Corp.," 1 professional corporation name must contain the word |
| B. Enter new principal office address, if applicable: | 15035 LANCET Rd |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | 15035 Lancer Rd Spring How Fl 34010 |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | <u>,≓</u> ⊆ 20 ° |
| (Maning dairess <u>MAT BE ATOST OFFICE BOX</u>) | |
| | |
| | |
| D. If amending the registered agent and/or registered office addi- | ress in Florida, enter the name of the 🚆 📮 🔘 |
| new registered agent and/or the new registered office address | □ |
| Name of New Registered Agent | <u>9m 6</u> |
| | |
| (Florida str | vei address) |
| New Registered Office Address: | tCity) , Florida (Zip Code) |
| | (2.1ρ Colle) |
| | |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v | in the and account the ablivations of the position |
| т негену ассерстве арронитен аз гезімегей адет. Тат затиш з | with and accept the obligations of the position. |
| | |
| Community of the particular of | and the second of the second or |
| Mgnature of New R | egistered 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)

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 | $\underline{\mathbf{V}}$ | 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 | | | 1 |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| (Attach <i>addi</i> | g or adding additional Articles, enter change(s) here: tional sheets, if necessary). (Be specific) |
|---------------------|--|
| | |
| | , |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | 111 40 41 |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| If an amen | Iment provides for an exchange reclassification or cancellation of issued charge |
| provisions | iment provides for an exchange, reclassification, or cancellation of issued shares, for implementing the amendment if not contained in the amendment itself: |
| (if not | applicable, indicate N/A) |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

,

| The date of each amendment(s) adoption: | , if other than the |
|--|------------------------|
| Effective date if applicable: (no more than 90 days after amendment file date) | |
| (no more than 90 days after amenament file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records. | l not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required. | l shareholder |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. | |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by (voting group) | |
| (voting group) | |
| Dated 8-10-24/ Signature fully fully | |
| (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | |
| Anthony Sulinski (Typed or printed name of person signing) | |
| | _ |
| President | <u>.</u> |
| (Title of person signing) | |

. . .