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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	ON: EXCLUSIVE MILI	WORK, INC.		
DOCUMENT NUMBER:	P93000027376			
The enclosed Articles of An	nendment and fee are sub	omitted for filing.		
Please return all correspond	ence concerning this mat	ter to the following:		
MAF	kk r. manceri, esq.			
		Name of Contact Person	<u> </u>	
MAF	RK R. MANCERI, P.A.	,		
	——————————————————————————————————————	F' . (C		
		Firm/ Company		
1600	SOUTH FEDERAL HIG	JHWAY - SUITE 900		
		Address		
POM	IPANO BEACH, FLORI	DA 33062		
<del></del>		City/ State and Zip Code	:	
, , , , , , , , , , , , , , , , , , ,	ACCONCLET NET			
MRMLAV	V@COMCAST.NET			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information con	cerning this matter, pleas	e call:		
MARK R. MANCERI, ESQ. 954 491-7099			491-7099	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
□ \$35 Filing Fee	S43.75 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)	
Division P.O. Box	ent Section of Corporations	Amenc Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FPLEC

2017 DEC 22 FM 3: 57

EXCLUSIVE MILLWORK, INC.

(Name of	Corporation as curren	ly filed with the Florida Dept. of State)	
93000027376			•
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment	ıt(s) to
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat	ition "Corp," "Inc," or	The new on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
B. Enter new principal office address, i		3040 N.E. 43RD STREET	
(Principal office address <u>MUST BE A ST</u>		FORT LAUDERDALE, FLORIDA 33308	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. BOX 480143	
		FORT LAUDERDALE, FLORIDA 33348	
D. If amending the registered agent an new registered agent and/or the new	d/or registered office ad v registered office addre	dress in Florida, enter the name of the	
Name of New Registered Agent	MARK R. MANCERI		
Tume by The Magazine Carriages	1600 SOUTH FEDERA	L HIGHWAY- SUITE 900	
	(Florida :	treei address)	
New Registered Office Address:	POMPANO BEACH,	FLORIDA 33062	
New Negisies en Office Hawess.		(City) (Zip Code)	
New Registered Agent's Signature, if cl	hanging Dagistarad Acres		
I hereby accept the appointment as regist	ered agent. I am familia	with and accept the obligations of the position.	
	Ancop	17/14/17	
	Signature of Non-	Rugistarud Avant if changing	

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.

Example: 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)	Title	Name	<u>Addres</u> s
1) Change	PD	CHARLES JEWETT	200 SOUTH PARK ROAD
Add			SUITE 150
X Remove			HOLLYWOOD, FLORIDA 33021
2) Change	PD	VICTORIA GRAEF	3040 N.E. 43RD STREET
$\frac{X}{Add}$		<del></del>	FORT LAUDERDALE, FLORIDA
Remove			33308
3) Change			<del></del>
Add			<del></del>
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Adđ			
Remove			<u></u>
6) Change			
Add			
Remove			

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)	s, if necessary). (Be specific)
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(if not applicable, indicate N/A)	vides for an exchange, reclassification, or cancellation of issued shares,
(y not applicable, that is	indicate N/4)
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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
<del></del> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following station of each voting group entitled to vote separately on the amendment(s).	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and share	holder
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and sharehold	er
	BER 14, 2017	
Signature	Sistoria W. Shark	
(By a selection	a director, president or other officer $\stackrel{\smile}{-}$ if directors or officers have not betted, by an incorporator – if in the hands of a receiver, trustee, or other sinted fiduciary by that fiduciary)	
	VICTORIA GRAEF	
	(Typed or printed name of person signing)	<del></del>
	TRUSTEE	
	(Title of person signing)	