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2010 JUL -: 7 AM II: 52 SECRETARY OF STATE TALLAHASSEE, FI BBJE.

A Control

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: C+R CUSTOM HOMES + REWOUTTONS, INC The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: C+R CUSTOM HUMES + RENOVATIONS
Firm/ Company BOX 2295 PODITH VESLY BEACH FL 32004-2295 City/ State and Zip Code CAIN'R 897 C Ao L COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee 43.75 Filing Fee & **■ \$**43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional Copy is enclosed)

Articles of Amendment to

Articles of Inco	prporation			
of				
C+R CUSTOM HOMES	& RENOLATIONS, INC			
(Name of Corporation as currently filed with the Florida Dept. of State)				
P960000068				
(Document Number of Corporati	ion (if known)			
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopte the following			
A. If amending name, enter the new name of the corporation	n:			
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."				
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	PONTE VEDRA BENUAJE			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	KL 32082			
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:				
Non Projectored Office Address: (Flor	ida straat address)			

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.

(City)

Signature of New Registered Agent, if changing

(Zip Code)

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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
VT	MECISSA MAY	5972 COUNTY RD. CAREN COVE STAY EL 32043	<i>209</i> S□ Add • 65
	·		Add Remove
	ng or adding additional Articles, en litional sheets, if necessary). (Be sp		
<u> </u>			
provision	endment provides for an exchange, as for implementing the amendment applicable, indicate N/A)		
·			
			<u>:</u>

The date of each amendment	(s) adoption: 7/5//0	,
Effective date if applicable:	(date of adoption is required)	
· ·	(no more than 90 days after amendment file date)	:
Adoption of Amendment(s)	(CHECK ONE)	•
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast ere sufficient for approval.	for the amendment(s)
	re approved by the shareholders through voting groups. The deformation of the description	
	cast for the amendment(s) was/were sufficient for approva	1 1
by	(voting group)	
action was not required. The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action	ı and shareholder
Dated	6125/10 Ruling / Jani	
sele	a director, president or other officer – if directors or officeted, by an incorporator – if in the hands of a receiver, truointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	<u> </u>
	VICE ILESIDENT (Title of person signing)	· · ·
•	(Little of nerson stoning)	•