P97000005085

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: C & C CANVAS	& AWNING, INC.		
DOCUMENT NUMI	P97000005085			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
	Michael Peterson			
		Name of Contact Person		
	C & C CANVAS & AWNING.INC.			
		Firm/ Company		
	3181 SE Slater Street			
	Address			
	Stuart, FL 34997			
	City/ State and Zip Code			
	mdpeterson1969@gmail.com	n		
		sed for future annual report	notification)	
For further informatio	n concerning this matter, plea		260-0743	
Name of Contact Person		at (Area Coc) 260-0743 de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

FILED

Articles of Amendment to Articles of Incorporation of

2022 JAN 10 AH 8: 44

C & C CANVAS & AWNING, INC.		• • •	
		지 : 1 전 14.75 	127,57,75
(Name o	of Corporation as currently	filed with the Florida Dept. of State)	1
P97000005085			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this F	dorida Profit Corporation adopts the follow	ving amendment(s)
. If amending name, enter the new na	ime of the corporation:		
	. .		21
name must be distinguishable and contain "Inc.," or Co," or the designation "C "chartered," "professional association,"	`orp," "Inc," or "Co". A	ompany," or "incorporated" or the abbrevia professional corporation name must con	The new ation "Corp" tain the word
3. Enter new principal office address,	if applicable;	3181 SE SLATER ST.	
Principal office address <u>MUST BE A.S.</u>		STUART, FL. 34997	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3181 SE SLATER ST.	
		STUART, FL. 34997	
If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	d/or registered office address: MICHAEL PETERSON	ss in Florida, enter the name of the	
Auna of New Registered Agent	3181 SE SLATER ST.		
	(Florida stre	u address)	
New Registered Office Address:	STUART	, Florida 3499	7
New Registered Office Address:		, i iorida	

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 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.

Example:

X Change	PT John D	<u>0¢</u>	
X Remove	<u>V</u> <u>Mike Je</u>	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
i) Change	D	CLAYTON R TRAVERS JR	1554 SW COLLEGE ST.
Add			STUART, FL. 34997
X Remove			
2) Change	D	CLAYTON R TRAVERS	1617 SW MEADOWVIEW WAY
Add			PALM CITY, FL. 34990
X Remove 3) Change	D	MARY O TRAVERS	1617 SW MEADOWVIEW WAY
Add			PALM CITY, FL. 34990
X Remove			
4) Change	PS	KELLIE L TRAVERS	1617 SW MEADOWVIEW WAY
X Add			PALM CITY, FL. 34990
Remove			
5) Change	CEOCE	MICHAEL D PETERSON	3181 SE SLATER STREET
X Add			STUART, FL. 34997
Remove			
6) Change	TR 	ETHAN JAMES TRAVERS	5015 SW SAVAGE AVE.
X Add			PALM CITY, FL 34990
Remove			

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	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	T	EVAN CLAYTON TRAVERS	1617 SW MEADOWVIEW WAY
X Add			PALM CITY, FL.34990
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
DUE TO DEATH OF CLAYTON R TRAVERS JR AND CLAYTON R TRAVERS
THE FOLLOW AMENDEMNTS WILL TAKE AFFECT AS OF JANURARY 1ST 2022
KELLIE L TRAVERS TO BE ISSUED 75% OF STOCKS
MICHAEL D PETERSON TO BE ISSUED 25% OF STOCKS
E. Han amondment provides for an exchange with 15 of the state of the
F. If 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)

.

	12/30/21		
The date of each amendment(s) ado			, if other than the
date this document was signed.			
1/1/22	;		
Effective date <u>if applicable</u> :	tno more than 90 day	vs after amendment file date)	
		and the second s	
Note: If the date inserted in this blo document's effective date on the Department	ck does not meet the applicable artment of State's records.	statutory filing requirements, this date w	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were adop action was not required.	ted by the incorporators, or board	I of directors without shareholder action at	id shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff		nber of votes cast for the amendment(s)	
☐ The amendment(s) was/were appro must be separately provided for ea		voting groups. The following statement separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were su	fficient for approval	
by		<u></u>	
•	(voting group)	·	
12/30/21			
Dated			
n	1.1 0/1		
Signature	The 1 st	10 P	
		if directors or officers have not been ads of a receiver, trustee, or other court	
	I fiduciary by that fiduciary)	ius of a receiver, trustee, or other court	
_	Michael Pe	etesor	
	(Typed or printed name	e of person signing)	
	Owner CEO		- · · · · · · · · · · · · · · · · · · ·
	(Title of person signing	r)	