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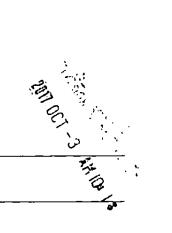
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TO: Amendment Section Division of Corporation					THE CLASSING IN
NAME OF CORPOR	ATION: SMITH PLASTERIN	GINC	 		
DOCUMENT NUMB	P97000055326	1			34 · ·
The enclosed Articles of	f Amendment and fee are subm	itted for	filing.		0
Please return all corresp	oondence concerning this matter	to the fo	ollowing:		**
;	MICHAEL SMITH				
-		Name o	f Contact Persor		
:	SMITH PLASTERING INC				
_		Fin	n/ Company		
	1384 ARNOLD AVE		<u>-</u>		
1	NAPLES, FL 34104		Address		
-	·	City/ISta	ate and Zip Code	<u> </u>	
VCMU		-			
KSIVII	TH@SMITHPLASTERING.CC E-mail address: (to be used		re annual report	notification)	
	E-man address. (to be used		re amuai report	nourcation)	
For further information	concerning this matter, please c	all:			
MICHAEL SMITH			at (239	216-4000	
Name o	f Contact Person			de & Daytime Telephone Number	
Enclosed is a check for	the following amount made pay	able to t	he Florida Depa	rtment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status	Certifi	Filing Fee & ed Copy onal copy is ed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amer Divis	ing Address adment Section ion of Corporations Box 6327		Amend Divisio	Address ment Section n of Corporations Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



SMITH PLASTERING INC

(Name o	f Corporation as	s currently filed with the Florida Dept. of State)	74
P97000055326			4
	(Document	Number of Corporation (if known)	68
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Stat	tutes, this Florida Profit Corporation adopts the following amer	idment(s) to
A. If amending name, enter the new na	me of the corpo	ration:	
N/A		The	new
	ation "Corp," "I	corporation," "company," or "incorporated" or the abbrevi Inc," or "Co". A professional corporation name must contain	ation
B. Enter new principal office address,		N/A	
(Principal office address MUST BE A S.)	<u>IKEET ADDKES</u>	22)	
			_
			_
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		N/A	
(manning anarcons <u>marine survivos a</u>	, , , , , , , , , , , , , , , , , , ,		
			_
If amending the registered agent an new registered agent and/or the nev		office address in Florida, enter the name of the	
new registered agent and/or the nev		e aduress.	
Name of New Registered Agent	N/A		
		(Florida street address)	
New Registered Office Address:		(City) , Florida (Zip Code)	
		(Elly Court)	
New Registered Agent's Signature, if cl	sanaina R egister	red Agent'	
		a familiar with and accept the obligations of the position.	
	Signature	e of New Registered Agent, 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: <u>X</u> 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)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change	٧	LORI SM	птн	4384 ARNOLD AVE	
XAdd				NAPLES, FL 34104	
Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		 			_
Add				<u> </u>	
Remove					

E. If amending or adding additional Articles, enter	r change(s)	here:		
(Attach additional sheets, if necessary). (Be spec	:ifiင်ု)			
N/A				
	 			
				
				
				
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	<u> </u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
		·		
F. If an amendment provides for an exchange, rec provisions for implementing the amendment if				
(if not applicable, indicate N/A)				
N/A				
		1		

The date of each amendment	10/1/2017 (s) adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	10/1/2017 (no mor	e than 90 days after amendment file date)
Notes If the data incorted in		ne applicable statutory filing requirements, this date will not be listed as the
document's effective date on the		
Adoption of Amendment(s)	(<u>CHECK ON</u>	(<u>F</u> .)
The amendment(s) was/wer by the shareholders was/we		ers. The number of votes cast for the amendment(s)
		ders through voting groups. The following statement itled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s)	was/were sufficient for approval
by		
	(voting group,	'
☐ The amendment(s) was/wer action was not required.	e adopted by the board of d	lirectors without shareholder action and shareholder
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporat	ors without shareholder action and shareholder
10/ Dated	2/2017	
se	y a director, president or ot	her officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court duciary)
	MICHAEL SMITH	
	(Typed or	printed name of person signing)
	PRESIDENT	
		(Title of person signing)
		Page 4 of 4