

P99000087571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

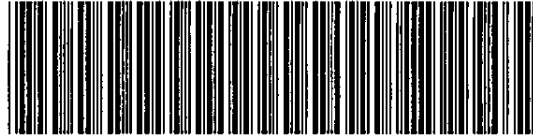
(Business Entity Name)

(Document Number)

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FILED BY STATE OF FLORIDA

01/22/07 -- 01/01/06 - 01/17 #35

FILED  
2007 JAN 31 AM 8:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend + N.C.*

C. Coulllette FEB 01 2007

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Allstar Carpet Demolition, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P99000087571

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CORY SCRAGG

(Name of Contact Person)

CHANGE TO →

CORY SCRAGG INC.

(Firm/Company)

2814 S. Shine Ave

(Address)

Orlando FL 32806

(City/State and Zip Code)

For further information concerning this matter, please call:

CORY Scragg

(Name of Contact Person)

at ( 321 ) 231 5349

(Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 25, 2007

CORY SCRAGG  
2814 S. SHINE AVE.  
ORLANDO, FL 32806

SUBJECT: ALLSTAR CARPET DEMOLITION, INC.  
Ref. Number: P99000087571

We have received your document for ALLSTAR CARPET DEMOLITION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You will need to file an amendment to make these changes to your corporation. I have enclosed the correct form for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette  
Document Specialist

Letter Number: 607A00005827

RECEIVED  
JAN 31 AM 8:00  
DIVISION OF CORPORATIONS

01/27/07

To whom it may concern:

If anything is filled out incorrectly  
please notify and explain in lame man  
terms what where and why it is wrong

Thank you

Cory S. Scragg

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Allstar Carpet Demolition Inc.

DOCUMENT NUMBER: P99000087571

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cory Scragg  
(Name of Contact Person)

Allstar Carpet Demolition Inc  
(Firm/ Company)

2814 S. Shine Ave  
(Address)

Orlando FL 32806  
(City/ State and Zip Code)

For further information concerning this matter, please call:

Cory Scragg  
(Name of Contact Person)

at ( 321 ) 231 5349  
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 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)

already on file

**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

Articles of Amendment  
to  
Articles of Incorporation  
of

Allstar Carpet Demolition, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

P99 0000 87 571

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**NEW CORPORATE NAME (if changing):**

Cory Scragg, Inc.

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (**BE SPECIFIC**)

Change Address: Principal, Mailing & Reg. Agent &  
Officers to:

2814 South Shine Ave

Orlando, FL 32806

FILED  
2007 JAN 31 AM 8:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: 10/15/06

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

**(CHECK ONE)**

☒ The amendment(s) was/were approved 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)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signature \_\_\_\_\_

(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)

Cory S. Scragg  
(Typed or printed name of person signing)

President

(Title of person signing)

**FILING FEE: \$35**