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COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations	•		
NAME OF CORPORATION: WEST FL	ORIDA HOM	ES, INC.	
DOCUMENT NUMBER: S04336			
The enclosed Articles of Amendment and fee are su	abmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
Michael Wm. N	Лead		
	Name of Contact Person	1	
Mead Law Firn	n		
	Firm/ Company		
24 Walter Mart	in Road NE S	Suite 2	
	Address	<u> </u>	
Fort Walton Be	each. FL 3254	8	
	City/ State and Zip Cod		
tamai Quaa a alla cufin			
tami@meadlawfir			
E-mail address: (to be us	sed for future annual report	notification)	
For further information concerning this matter, pleas	se call:		
Michael Wm. Mead	at (850	243-3135	
Name of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:	
■ S35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street	Address	
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327		on of Corporations	
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



WEST FLORIDA HOMES, INC.

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

S04336

ent(s) to

001000	
(Document Number of Corporation (if	fknown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this attacks of Incorporation:	Florida Profit Corporation adopts the following amendment
A. <u>If amending name, enter the new name of the corporation:</u> WHITWORTH BUILDERS, INC 5	50The new
name must be distinguishable and contain the word "corporation" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "oword "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	eet address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v	
Signature of New Registered A	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: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change				•
Add		_		
Remove				
3)Change		_		· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Change Add				
Remove				
k emove				

Attach ada	ng or adding additional A ditional sheets, if necessary). (Be specific)		
• .			······································		
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
A-1-1-1					
	····				
f an amei	ndment provides for an ex	change reclass	ification or can	collation of issued	charec
provision	is for implementing the ar	nendment if no	contained in th	e amendment itse	elf:
(if no	ot applicable, indicate N/A)				
		···			

The date of each amendment(s) ad	loption: 4/29/2013
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopty the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adopted action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder
Dated 4/29/2	013 11 11 11
Signature 4	V 1/1/////
(By a di	rector, president or other officer - if directors or efficers have not been
selected	i, by an incorporator – if in the hands of a receiver, trustee, or other court
appoint	ed fiduciary by that fiduciary)
_	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)