505369

((Requestor's Name)
((Address)
((Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
((Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions Out by	to Filing Officer: Which downs Up - 21/12





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SECRETARY OF STATE
MATANASSEE, FLORIDA

JAN DE ZOIZ

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: S. C. Signa	ture Construction	n Corp
DOCUMENT NUMB	_{SER:} S05369		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Joseph G Matiss	k	
•		Name of Contact Persor	1
	S C Signature Co	onstruction Corp	
		Firm/ Company	
	8530 Oreto Dr.		
		Address	-
	Port Richey, Fl 34	4668	
		City/ State and Zip Code	2
joe	@scsignaturecon	struction.com	
<u> </u>		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
	· · · · · · · · · · · · · · · · · · ·		
Joe Matissek		_{at (} 727	842-5163
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee
	Certificate of Status	Certified Copy	Certificate of Status
		(Additional copy is	Certified Copy
		enclosed)	(Additional Copy is enclosed)
Mail	ling Address	Stroot	Address
	endment Section	Street Address Amendment Section	
Division of Corporations		Division of Cornorations	

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

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

Articles of Amendment to Articles of Incorporation of

2Heth J-1-13

S. C. Signature Construction Corp.

(Name of Corporation as	currently filed with the Flo	orida Dept. of State)	
S05369			
(Documer	nt Number of Corporation (if	known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	Clorida Profit Corporation adopts the t	following amendment(s)
A. If amending name, enter the new na	me of the corporation:		
Not Applicable			The new
name must be distinguishable and con. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional corporation nam	r the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S		Not Applicable	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		Not Applicable	京京
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent		ess in Florida, enter the name of the	FILED M. 9: 03
	(Florida stre	et address)	
New Registered Office Address:	Not Applicable	, Florida	
	(City)	(Zip C	Code)
New Registered Agent's Signature, if c			osition.
	απατατό οι Νόιν κραιείονου Δι	GPNI II CN/INGING	

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 <math>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 St	mith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	SVF	-	Petrulli, Christina L	404 Portland Ave
Add X Remove				Spring Hill, Fl 34606
2) Change		_		
Add Remove				
3) Change		_		
Remove				
4) Change		_		
Add				
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)	
Not Applicable	
· · · · · · · · · · · · · · · · · · ·	
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)	
Not Applicable	

The date of each amendment(s) adoption	on:
Effective date if applicable:	1-1-13
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) nt for approval.
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	e amendment(s) was/were sufficient for approval
by	(voting group)
action was not required. The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder
Signature (By addirecto	r, president of other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)
Jos	seph G Matissek
	(Typed or printed name of person signing)
Pre	esident
	(Title of person signing)