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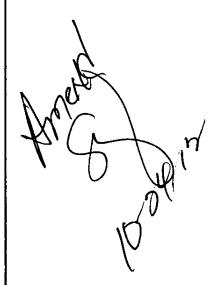
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	ue #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Na	me)
(Do	ocument Number	
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
	,	

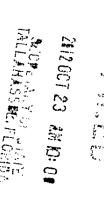




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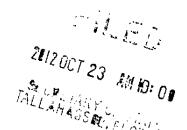


COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: South Floodoument number: P03000059	orida Rolling Doors, Inc.	
DOCUMENT NUMBER: 1 0000000		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Mario Rodrigu		
	Name of Contact Person	
South Florida	Rolling Doors, Inc.	
	Firm/ Company	
8900 NW 119	Street	
llinia ata Oand	Address	
Hialean Gard	ens, FL 33018	
	City/ State and Zip Code	
E-mail address: (to be	used for future annual report notification)	
For further information concerning this matter, ple	ease call:	
Mario Rodriguez	_{at (} 305)556-6633	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:	
S35 Filing Fee & Certificate of Status		
Mailing Address	Street Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

From:

Articles of Amendment Articles of Incorporation



South Florida Rolling Doors, Inc.

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

P03000059977

mendment(s) to

(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable;	8900 NW 119 Street
(Principal office address MUST BE A STREET ADDRESS)	Hialeah Gardens, FL 33018
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 ad new registered agent and/or the new registered office addre	ldress in Florida, enter the name of the
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida
(CI	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent: ar with and accept the obligations of the position.
Signature of New Registere	ed Agent, if changing

From: 5

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.

X 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>	Name	Address
1) Change	S	Claudia Rodriguez	15837 NW 4th Court
Add			Pembroke Pines, FL 33028
X Remove			
2) Change	VP	Gustavo Almanza	180 Royal Palm Road
Add			Hialeah Gardens, FL 33016
X Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	icles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
	
an amendment provides for an exc rovisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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The date of each amendment(s) adoption: October 17, 2012
Effective date if applicable: October 17, 2012
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted 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.
Dated October 17, 2012
Signature Maus Colff
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)
Mario Rodriguez
(Typed or printed name of person signing)
President
(Title of person signing)