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COVER LETTER

TO: Amendment Section **Division of Corporations** Kelly's Garage Door Services, Inc. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Rusty Woodward Name of Contact Person Kelly's Garage Door Services, Inc. Firm/ Company 2011 Woodstock Lane Address Tallahassee, FL 32303 City/ State and Zip Code pennymac822@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Rusty Woodward Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & \$52.50 Filing Fee S35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

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

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Kelly's Garage Door Services, Inc.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name of Corporation as c	currently filed with the Florida Dept. of State)
P07000097490	
(Document Nu	lumber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutits Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporal	ation;
N/A	The new
	ttion," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word n "P.A."
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
(Mailing address MAT BE A POST OF FICE BOX)	
	.න
D. If amending the registered agent and/or registered offi	fice address in Florida, enter the name of the
new registered agent and/or the new registered office a	
Name of New Registered Agent	-
(FI	Florida street address)
New Registered Office Address;	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	
Therety accept the approximation and expenses a agent. I ampo	
Signature of	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	$\underline{\mathbf{v}}$	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	V	Orlando A. Garza	408 Richview Park Circle East
X Add			Tallahassec, FL 32301
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additi	or adding additional onal sheets, if necessar	y). (Be specific)			
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If an amend	ment provides for an	exchange, reclassifi	cation, or cancella	ition of issued shares	<u>'-</u>
provisions f	or implementing the	amendment if not c	ontained in the an	nendment itself:	
-	pplicable, indicate N/A	: !			
/^ 					
					
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<u> </u>		.			

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Fhe date of each amendment(s) ac	5 August 2020	, if other than the
late this document was signed.	· · · · · · · · · · · · · · · · · · ·	
Effective date <u>if applicable</u> :		
	tno more than 90 days after amendment file o	date)
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing require partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors without sh	archolder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast for the ficient for approval.	e amendment(s)
	roved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amend	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
5 August 20 Dated	20	
Signature	معاندها	
(By a di selected	rector, president or other officer – if directors or officers he, by an incorporator – if in the hands of a receiver, trustee and fiduciary by that fiduciary)	
	William E. Woodward	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	