P11000087747

(Re	equestor's Name)	
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JUN 2 2 2012 T. ROBERTS

COVER LETTER

TO: Amendment Section

Division of Corporations		•	
NAME OF CORPORATION: We Do S	hutters, Inc.		
DOCUMENT NUMBER: P11000087	747		
DOCUMENT NUMBER.			
The enclosed Articles of Amendment and fee are su	abmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Bruce Page			
, , ,	Name of Contact Perso	n	
We Do Shutter	rs, Inc.		
	Firm/ Company		
2338 Immokal	ee Rd. #348		
	Address		
Naples, FL 34	110		
- • • • • • • • • • • • • • • • • • • •	City/ State and Zip Cod	e	
wedoshutters@ad	ol com		
	sed for future annual report	notification)	
to the state of th			** * * * **
For further information concerning this matter, pleas	se call:		
Bruce Page	239	, 200-2294	
Name of Contact Person	Area Co	de & Daytime Telephone Number	_
Enclosed is a check for the following amount made	navable to the Florida Dena	artment of State:	
	,		
\$35 Filing Fee \$\text{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)	
Mailing Address	Street	Address	
Amendment Section	Amendment Section		
Division of Corporations		on of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



We Do Shutters, Inc

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

P11000087747

(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

'A	
e must be distinguishable and contain the word "cor rp.," "Inc.," or Co.," or the designation "Corp," "Inc I "chartered," "professional association," or the abbrev	," or "Co". A professional corporation name must
Enter new principal office address, if applicable: ncipal office address <u>MUST BE A STREET ADDRESS</u>	N/A
	N/A
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A
Mailing address <u>MAY BE A POST OFFICE BOX)</u> f amending the registered agent and/or registered offi	ce address in Florida, enter the name of the
Mailing address MAY BE A POST OFFICE BOX) amending the registered agent and/or registered offi	ce address in Florida, enter the name of the
Mailing address MAY BE A POST OFFICE BOX) f amending the registered agent and/or registered office and registered agent and/or the new registered office and registered agent and/or the new registered office and registered agent N/A	ce address in Florida, enter the name of the address:
Mailing address MAY BE A POST OFFICE BOX) f amending the registered agent and/or registered office and registered agent and/or the new registered office and registered agent and/or the new registered office and registered agent N/A	ce address in Florida, enter the name of the

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	PT Jo	ohn Doe	
X Remove	<u>v</u> <u>w</u>	like Jones	
X Add	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>D</u>	Robert Boyce	3771 5th Ave NW Naples FL 34110
2) Change Add Remove	VP	Jill Johnson	485 2nd Ave S Naples, FL 34102
3) Change X Add Remove	<u>D</u>	William M. Zawko	7588 Morgan Rd. Ft. Myers, FL 33967
4) Change X Add Remove	D	Jeremy Carlson	17516 Dumont Dr. Ft. Myers, FL 33967
5) Change Add Remove			
6) Change Add Remove			

attach additional sheets, if necessary).	de specific)		
			· · · · · · · · · · · · · · · · · · ·
			
			
			
			
			
If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	endment if not co	ntained in the amendmen	
		ollows:	
Bruce Page	ares as f	ollows:	
		ollows:	
Bruce Page	31%	ollows:	
Jill Johnson	31% 30%	ollows:	

The date of each amendment(s) a	adoption: 6/18/12
Effective date if applicable: 6/	718/12
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were ad by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	lopted by the board of directors without shareholder action and shareholder
action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 6/18/	
(By a	director, president or other officer - if directors or officers have not been
selecte	ed, by an incorporator – if in the hands of a receiver, trustee, or other court
арроп	nted fiduciary by that fiduciary)
	Bruce Page
	(Typed or printed name of person signing)
	President
	(Title of person signing)