PIS 000016374

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COVER LETTER

Division of Corporations NAME OF CORPORATION: MIAMI ALUMINUM ROOF, CORP **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ARIEL LEMUS Name of Contact Person 3411 DORJE STREET Address NORTH PORT, FL 34291 City/ State and Zip Code lemusariel24@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ARIEL LEMUS Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee **\$43.75** Filing Fee & **□\$43.75** Filing Fee & ☐ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

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

MIAMI ALUMINUM ROOF, CORP		
(Name of Corporation as current	tly filed with the Florida Dept. of State)	
P15000016374		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the follo	owing amendment(s) t
A. If amending name, enter the new name of the corporation;		
DESIGN ALUMINUM PATIO CORP.		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must co	viation "Corp.,"
B. Fatan now principal office address if applicables	NA	60 10
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
		
	<u></u>	
		· ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	 :
(Maning and Ess MAT DE AT TOST OF THE DOA)		

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D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address Name of New Registered Agent New Registered Agent		
(Florida s	street address)	
110		
New Registered Office Address:	(City), Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Aget I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the posi- Registered Agent, if changing	ion.
Signature of New	Kegistered Agent, if changing	
Check if applicable		

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

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	Doe		
X Remove	<u>V</u> <u>Mike</u>	: Jones		
X Add	<u>SV</u> <u>Sally</u>	Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addręs</u> s	
1) Change	NA_			
Add				
Remove				
2) Change	NA			
Add				
Remove 3) Change	_WA			
Add		/	<u> </u>	
Remove				
4) Change	NP			· - ···
Add				
Remove				
5) Change	NA		<u> </u>	
Add				
Remove	01 0		***	
6) Change	war			
Add				<u> </u>
Remove				

amending or adding additional Artach additional sheets, if necessary)	(Be specific)	<u>nçı e</u> .		
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11/14				
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an amendment provides for an ex rovisions for implementing the an	cnange, reclassification	i, or cancellation of	ont itealf:	
(if not applicable, indicate N/A)	enament ii not coman	ien in the Smendii	em usen.	
(y not applicable, material tria)				
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The date of each amendment(s) adoption:	, if other than the
·	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	.
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date locument's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	n and shareholder
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.	1
☐ 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):	ıı
"The number of votes cast for the amendment(s) was/were sufficient for approval	
hy" (voting group)	<u> </u>
(voting group)	_
Mar 6, 2025 Dated	
Signature Artificenus (Mar 6, 2025 16:23 EST)	
(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)	
Ariel Lemus	
(Typed or printed name of person signing)	
Owner	
(Title of person signing)	