## P99000 1447

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: C & C Wind	ow & Door Con	npany, INC.	
DOCUMENT NUMBER: P99000014479	9		
The enclosed Articles of Amendment and fee are sub	mitted for filing.		
Please return all correspondence concerning this mate	er to the following:		
Kristina M. Hudso	n, Esq.		
•	Name of Contact Persor	1	
Booth & Cook, P./	۹.		
<u> </u>	Firm/ Company		
7510 Ridge Road			
	Address		
Port Richey, FL 3	4668		
	City/ State and Zip Code	2	
bcrockford@ccwindo	w.com		
_	ed for future annual report	notification)	
For further information concerning this matter, please	e call:		
Robert A. Crockford	<sub>at (</sub> 727	, 819-0414	
Name of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:	
\$35 Filing Fee  \$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	Division of Corporations		
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314		xecutive Center Circle Issee, FL 32301	



## Articles of Amendment to Articles of Incorporation of

C & C Window & Door C	company, INC.		
*	currently filed with the Flor	ida Dept. of State)	
P99000014479			-
(Documer	nt Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Flo	orida Profit Corporation adopts the following	g amendment(s) to
A If amending name, enter the new na	ame of the corporation:		
N/A			The new
	nation "Corp," "Inc," or "Co	"company," or "incorporated" or the ab". ". A professional corporation name must of the ab". "."	
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	icable: OFFICE BOX)		
(			•
			•
			•
D. If amending the registered agent an new registered agent and/or the new		in Florida, enter the name of the	
Name of New Registered Agent	Mary K. Crockford		
	18136 Dew Bloor	n Drive	
	(Florida street	•	
New Registered Office Address:	Hudson	, Florida 34667	<u>-</u>
	(City)	(Zip Code)	
New Registered Agent's Signature, if c			
I hereby accept the appointment as regist	tered agent. I am familiar wit	h and accept the obligations of the position.	
$\mathcal{A}$	any K Can	-Rhow W	

Page 1 of 4

Signature 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: X_Change	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
_ <u>X</u> Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	STDCF	0	Mary K. Crockford	15050 Labor Place
X Add				Hudson, FL 34667
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		-
Add				
Remove				
O Cl				
6) Change	`	_		
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	
N/A	(De specific)
IN/A	
_	
•	
•	
. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) ad	option:
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
DatedQ_	19.28 2012
Signature M	ary K Crockford
(By a di	rector, president or other officer - if directors or officers have not been
	I, by an interporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
-	Mary K. CROCK ford (Typed or printed name of person signing)
	(Typed or printed name of person signing)
_	Director
	(Title of person signing)