## P17000087565

| (Red                      | questor's Name)   |             |
|---------------------------|-------------------|-------------|
| (Ado                      | dress)            |             |
| (Add                      | dress)            |             |
| (City                     | //State/Zip/Phone | e #)        |
| PICK-UP                   | MAIT              | MAIL        |
| (Bus                      | siness Entity Nar | me)         |
| (Doc                      | cument Number)    |             |
| Certified Copies          | Certificates      | s of Status |
| Special Instructions to F | Filing Officer:   |             |
|                           |                   |             |
|                           |                   |             |
|                           |                   |             |

Office Use Only



700314729817

08/21/18--01013--020 \*\*35.00

18 JUN 21 PH 3: 11
SECRETALY OF STATE
SALI ANASSET FLORID

R. WHITE JUN 22 2018

AMEND

## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOI                         | RATION: JAVIER OVIEDO                       | S VINYL SIDING INC.  |  |  |  |
|--|---|--|--|--|--|
| DOCUMENT NUMI                          | BER: P17000087565                           |  |  |  |  |
|  | of Amendment and fee are su                 | bmitted for filing.  |  |  |  |
| Please return all corre                | spondence concerning this mat               | tter to the following:   |  |  |  |
|  | JAVIER OVIEDO MENDEZ                        | 2  |  |  |  |
|  | Name of Contact Person                      |  |  |  |  |
|  | JAVIER OVIEDO'S VINYL                       | SIDING INC.  |  |  |  |
|  | <u> </u>                                    | Firm/ Company  |  |  |  |
|  | 10831 EM EN EL GROVE R                      | •  |  |  |  |
|  |   | Address  |  |  |  |
|  | LEESBURG, FL 34788                          |  |  |  |  |
|  |   | City/ State and Zip Code   |  |  |  |
| For further informatic                 | E-mail address: (to be us                   | sed for future annual report                                       | notification)  |  |  |
| JAVIER OVIEDO MENDEZ                   |   | at (   | 455-2673   |  |  |
| Name                                   | of Contact Person                           | Area Co  | de & Daytime Telephone Number  |  |  |
| Enclosed is a check for                | or the following amount made                | payable to the Florida Depa  | artment of State:  |  |  |
| ■ \$35 Filing Fee                      | □\$43.75 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  |  |  |
| Ām                                     | endment Section                             | Amendment Section  |  |  |  |
| Division of Corporations               |   | Division of Corporations   |  |  |  |
| P.O. Box 6327<br>Tallahassee, FL 32314 |   | Clifton Building 2661 Executive Center Circle                      |  |  |  |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

JAVIER OVIEDO'S VINYL SIDING INC. (Name of Corporation as currently filed with the Florida Dept. of State) P17000087565 (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 its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: \_ (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Doe         |                         |
|-------------------------------|--------------|------------------|-------------------------|
| X Remove                      | <u>v</u>     | Mike Jones       |                         |
| X Add                         | <u>sv</u>    | Sally Smith      |                         |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>      | <u>Addres</u> s         |
| 1) Change                     | D            | JUSTIN JEFFERSON | 10831 EM EN EL GROVE RD |
| Add                           |              |                  | APT 10                  |
| X Remove                      |              |                  | LEESBURG, FL 34788      |
| 2) Change                     | D            | ADAM J HERRERA   | 10831 EM EN EL GROVE RD |
| X Add                         |              |                  | APT 10                  |
| Remove                        |              |                  | LEESBURG, FL 34788      |
| 3 ) Change                    |              |                  |                         |
| Add                           |              |                  |                         |
| Remove                        |              |                  |                         |
| 4) Change                     |              | _                |                         |
| Add                           |              |                  |                         |
| Remove                        |              |                  |                         |
| 5) Change                     |              |                  |                         |
| Add                           |              |                  |                         |
| Remove                        |              |                  |                         |
| 6) Change                     |              |                  |                         |
| / Add                         |              |                  |                         |
| Remove                        |              |                  |                         |

|  | cles, enter change(s) her<br>(Be specific)   |                                   |                |               |
|--|--|-----------------------------------|----------------|---------------|
|  |  |                                   |                | _             |
|  |  |                                   |                |               |
|  |  |                                   |                |               |
|  |  |                                   |                |               |
|  |  |                                   |                |               |
|  | ······································   |                                   |                | <u> </u>      |
|  |  | <del>_</del>                      | -              |               |
|  |  | . <u>-</u> -                      |                | <del></del>   |
|  |  |                                   |                |               |
|  | · · ·  |                                   |                |               |
|  | <del></del> .  | · · · · · · · · · · · · · · · · · |                |               |
| <u> </u>   |  | <u> </u>                          | <del></del>    |               |
|  |  |                                   |                |               |
|  |  |                                   |                |               |
|  |  |                                   |                |               |
|  |  |                                   |                | · <del></del> |
|  |  |                                   |                | <u> </u>      |
|  |  | <u> </u>                          |                |               |
|  |  |                                   |                |               |
|  |  | r cancellation of iss             | ued shares,    |               |
| If an amendment provides for an excl   | iange, reclassification, o   |                                   |                |               |
| provisions for implementing the ame  | nange, reclassification, on<br>ndment if not contained   | in the amendment                  | itself:        |               |
| If an amendment provides for an exch<br>provisions for implementing the ame<br>(if not applicable, indicate N/A) | nange, reclassification, on the name of the name of not contained  | in the amendment                  | itself:        |               |
| provisions for implementing the ame  | nange, reclassification, on the name of th | in the amendment                  | <u>itself:</u> |               |
| provisions for implementing the ame  | nange, reclassification, on the name of th | in the amendment                  | <u>itself:</u> | _             |
| provisions for implementing the ame  | nange, reclassification, on the name of th | in the amendment                  | <u>itself:</u> | _             |
| provisions for implementing the ame  | nange, reclassification, on the name of th | in the amendment                  | <u>itself:</u> |               |
| provisions for implementing the ame  | nange, reclassification, on the name of th | in the amendment                  | <u>itself:</u> |               |
| provisions for implementing the ame  | nange, reclassification, on the name of th | in the amendment                  | itself:        |               |
| If an amendment provides for an excl<br>provisions for implementing the ame<br>(if not applicable, indicate N/A) | nange, reclassification, on the name of th | in the amendment                  | itself:        |               |

| The date of each amendment(s) adoption: JUNE 11 2018   | _, if other than the |
|--|----------------------|
| date this document was signed.   |                      |
| 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 will a document's effective date on the Department of State's records.                      | not be listed as the |
| Adoption of Amendment(s) (CHECK ONE)   |                      |
| The amendment(s) was/were adopted by the shareholders. The number of votes east 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 <u>DU11118</u>   |                      |
| 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)   |                      |
| (Typed or printed name of person signing)  |                      |
| President  |                      |
| (Title of person signing)  |                      |