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SECRETARY OF STATE

C GOLDEN
JUL 1 1 2018

COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: VGN H	Windows	and Doors Installer
DOCUMENT NUMBER: P. 170000	218266	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Arnendment and fee are suit	omitted for filling.	
Please return all correspondence concerning this matt	ter to the following:	
Hugo	Name of Contact Perso	
Mad H window	5 q n d 1-00	ers Installers Inc.
1290 north		sted # 2222
Clermont	FL 3471 City/State and Zip Coo	
	YA how - Co e	
For further information concerning this matter, please	e call:	
Hugo So40 Name of Contact Person	at (554)	245-64 80 ode & Daytime Telephone Number
Enclosed is a check for the following amount made p		
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee &	□40 75 53; 5 0	Pero so silvers a
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy	☐\$52.50 Filing Fee Certificate of Status
03.0	(Additional copy is	Certified Copy
	enclosed)	(Additional Copy is enclosed)
Mailing Address	Street	Address
Amendment Section		Iment Section
Division of Corporations	Division	on of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FILED

2018 JUL -9 AM 11: 05

V & H WIND	OOWS AND DOOF	RS INSTALLERS INC.	1010 JUL -9	AH 11: 05
(Name of Corpora	ation as currently f	iled with the Florida Dept	L of State ALLAHASSEE	OF STATE
	P170000182	66		LIFLORIDA
(Doc	current Number of C	orporation (if known)	-	
Pursuant to the provisions of section 607.1006, Flor Its Articles of Incorporation:	rida Statutes, this FA	orida Profit Corporation ad	dopts the following amendm	ent(s) to
A. If amending name, enter the new name of the	corporation:			
			The nev	v
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or the	orp," "Inc," or "Co	". A professional corpora	orated" or the abbreviation ation name must contain the	7 9
B. Enter new principal office address, if applical (Principal office address <u>MUST BE A STREET AI</u>				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	BOX)			
D. If amending the registered agent and/or registered agent and/or the new registered	stered office addressed office address:	s in Florida, enter the nan	ne of the	
Name of New Registered Agent			·-·	
	(Florida street	address)		
No. Doning of Office Address.	() /0/100 04/001	sources)	Clasida	
New Registered Office Address:	(C	ity)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		h and accept the obligation	s of the position.	
Si	gnature of New Reg	istered 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 Do	<u>0e</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change	$\underline{\nu}$	Hugo P. Soto	190 N Ridge Blyd #2222 Chrmont Fl 34711
Add			#2222
Remove			Clermont Fl 3:4711
2)Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)

n amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
an amendment provides for an exch rovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
odic uns document was signed.	
Effective date if applicable: (no more than 90 days at	fter amendment file date)
·	•
Note: If the date inserted in this block does not meet the applicable stat document's effective date on the Department of State's records.	utory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The arriendment(s) was/were approved by the shareholders through voti must be separately provided for each voting group entitled to vote sepa	
"The number of votes east for the amendment(s) was/were sufficient	ent for approval
by(voting group)	<u> </u>
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without action was not required. The amendment(s) was/were adopted by the incorporators without share action was not required.	
Dated 07/03/18	
Signature	
Signature	rectors or officers have not been of a receiver, trustee, or other court
Hugo So (Typed or printed name of	10
(1 ypec) or printed name of	Pres: Lant
(Title of persor	signing)