## P0000105546

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SECRETARY OF STATE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: HOLLYWOO  | D VERTICAL BLINDS, INC.  |   |
|--|--|---|
| DOCUMENT NUMBER: PO0000105546  |  |   |
| The enclosed Articles of Amendment and fee ar  | re submitted for filing.   |   |
| Please return all correspondence concerning this   | s matter to the following:   |   |
| MARIANA HOHEB  |  |   |
| (Name o  | of Contact Person)   |   |
| HOLLYWOOD VERTICAL B   | BLINDS, INC.   |   |
| (Fire  | m/ Company)  | <del></del>   |
| 5953 SW 21 STREET  |  |   |
|  | (Address)  |   |
| HOLLYWOOD, FLORIDA 33023   | 3  |   |
|  | ate and Zip Code)  |   |
| For further information concerning this matter,  | please call:   |   |
| MARIANA HOHEB  | at ( <u>954</u> ) <u>966-201</u>   | 2   |
| (Name of Contact Person)   | (Area Code & Daytime   | Telephone Number)   |
| Enclosed is a check for the following amount:  |  |   |
| ☑ \$35 Filing Fee  | \$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301 | rcle  |

## Articles of Amendment to Articles of Incorporation of



## HOLLYWOOD VERTICAL BLINDS, INC.

POO000105546

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

| (Document number of corporation (if known)   |
|--|
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:   |
| NEW CORPORATE NAME (if changing):  |
| (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "lnc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") |
| AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)   |
| ARTICLE VI: Change in registered agent to: Mariana Hoheb   |
| 17653 Sw 9th Street  |
| Pembroke Pines, FL 33023   |
|  |
| ARTICLE V: Removal of President and Director of: Homer Hoheb   |
| 17653 Sw 9th Street  |
| Pembroke Pines, FL 33023   |
| Add Mariana Hoheb as President   |
| (Attach additional pages if necessary)   |
| If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A                          |
|  |
|  |
|  |

(continued)

| The date of each amendment(s) adoption: September 9, 2008  |
|--|
| Effective date if applicable: September 9, 2008  |
| (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s) ( <u>CHECK ONE</u> )  |
| The amendment(s) was/were approved by the shareholders. The number of votes cast 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.   |
| Signature Lohe .  (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) |
| Mariana Hoheb  |
| (Typed or printed name of person signing)  |
| Secretary  |
| (Title of person signing)  |

FILING FEE: \$35