## P0200003348

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MAR 0 3 2016

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: PERFEC	T STORM SHU	TTERS luc
	r: <u>Pozooo</u>		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this made	tter to the following:	
	[3:	Name of Contact Person  PRFECT STORM S  Firm/ Company  275 SW 136 S  Address  Address  City/ State and Zip Code	Street, Unit #33
		City/ State and Zip Code	
For further information of	concerning this matter, pleas	se call:	
	E. Romero Contact Person		
	he following amount made		
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)
Mailie	na Address	Street	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 Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

	of
PERFEAT	STORM SHUTTERS INC
	as currently filed with the Florida Dept. of State)
Poz	000008348
	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statista Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:
N/A	The new
name must be distinguishable and contain the word " "Corp.," "Inc.," or Co.," or the designation "Corp," ' word "chartered," "professional association," or the abb	'corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the previation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>///A</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	
Name of New Registered Agent	N/A
<del></del>	(Florida street address)
New Registered Office Address:	Florida
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	m familiar with and accept the obligations of the distinction of the d
Signatur	re 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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	v Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>D</u> _	Luis Benites	13275 SW 136 Street
X_ Add			Unit #33
Remove			Miami, F1 33186
2) Change	<u>D</u>	Justo B. Carrera	13275.5W 136 Street
. <u>X</u> Add			Unil #33
Remove			Miani, F7 33186
3) Change			
Add			
Remove			
4) Change	<del></del>		
Add ·			
Remove			
5) Change			- <u></u> -
Add			
Remove		,	
6) Change			
Add			
Remove			

If amending or adding additional Art (Attach additional sheets, if necessary).	icles, enter change(s) here:
(Atlaci) daditional sneets, if necessary).	(be specific)
	N/A
	<b>,</b>
	·
	<u> </u>
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	<u>.</u>
	<i>N/A</i>
	, ,
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file da	te)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the a by the shareholders was/were sufficient for approval.	mendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment.	
"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 action was not required.	i shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sha action was not required.	reholder
Dated February 19th, 2016	
Signature	1
(By a director, president or other officer. If directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, of appointed fiduciary by that fiduciary)	
Jose E. Romero	
(Typed or printed name of person signing)	·
PVST	
(Title of person signing)	