P020005313

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
		,
	siness Entity Nar	
(bu	Silless Ellity Nai	rie)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	J	!
<u> </u>		

Office Use Only



600272336046

05/05/15--01040--008 **43.75

15 MY -5 MH: 04

And

MAY 12 2015 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

	n Blinds & Shutters Outlet inc			
DOCUMENT NUMBER: P02000085	313			
The enclosed Articles of Amendment and fee ar	e submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
Yehia Bakr				
	Name of Contact Person			
New Compass	Solutions			
	Firm/ Company			
4346 N Pulaski Rd Ste C				
	Address			
Chicago, IL 60	641			
	City/ State and Zip Code			
tax@newcompass	solutions.com			
	be used for future annual report notification)			
For further information concerning this matter,	please call:			
Yehia Bakr	at (773) 202-9595			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount m	ade payable to the Florida Department of State:			
□ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State				
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 Circle Tallahassee, FL 32301			

Articles of Amendment Articles of Incorporation

NAY -5 AM 11: 04

American Blinds & Shutters Outlet Inc

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

P02000085313

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation add	opts the following	g amei	ndmen
A. If amending name, enter the new na	ame of the corporation;		•		
				_The	new
name must be distinguishable and con. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "	Co". A professional corporat	ated" or the ai ion name must i	bbrevii contair	ation . n the
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		2750 Taylor Ave	Ste F		÷
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Orlando, FL 32806			
		c/o New Compass Solutions			
		4346 N Pulaski Rd Ste C		•	
		Chicago, IL 60641		•	
D. If amending the registered agent an new registered agent and/or the new			e of the		* 1
Name of New Registered Agent	Tarek Aly				
	2750 Taylor Ave Ste F				
	(Florida str	eet address)		•	
New Registered Office Address:	Orlando , Florid		32806	· .	
•	(City)		(Zip Code)	, •	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	nanging Registered Agent: tered agent. I am familiar v	vith and accept the obligations	of the position.		,
	- John Political Company	Agant if changing	• •		

If amending the Office	rs and/or	Directors, enter the title and name of each office	er/director being removed and title, n	ame, and
(Attach additional sheets Please note the officer/d	and/or L s, if neces, irector tit	prector being added: sury) le by the first letter of the office title:	e de la companya de l	
held. President, Treasur	= Chief . er, Direct	t; T= Treasurer; S= Secretary; D= Director; TR= Financial Officer. If an officer/director holds more or would be PTD. Illowing manner. Currently John Doe is listed as th	e than one title, list the first letter of e	ach office
a change, Mike Jones le. Mike Jones, V as Remov. Example:	aves the c	orporation. Sally Smith is named the V and S. Thes	e 131 and Mine Joines is listed as the verse should be noted as John Doe, PT as a	There is Change,
X Change	<u>PT</u>	John Doc		, •
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	And the second second
1) Change	D	Hassan Shivarani	851 West Hwy 436	_
Add			Suite 1047	_
Remove			Altamonte Springs, FL 327	
2) Change	PDC	Tarek Aly	2750 Taylor Ave Ste F	-
Add Remove			Orlando, FL 32806	- ,
3) Change	s	Qamil Murtezi	2750 Taylor Ave Ste F	
Add			•	_
Remove			Orlando, FL 32806	-
4) Change	•			.
Add				
Remove	. ,			- 1
5) Change				_
Add				
Remove				
6) Change			·	, - .
Add				-
Remove				_

			• •
	<u>.</u>	<u>.</u>	
	*************************************	-	
	 .	-	
		<u> </u>	
		<u> </u>	•

	·	·	<i>1</i>
	·-·-		
		•	
		<u> </u>	
		<u>_</u>	
If an amendment provides for an 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)			
		<u> </u>	

The date of each amendment(s) adoption: April 17, 2015 date this document was signed.		if other than the	;
Effective date if applicable: April 17,2015			;
(no more than 90 days after amendment file da	(e)	· , '	
	, ,		
Adoption of Amendment(s) (CHECK ONE)			
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the arby 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.	ing statement ent(s):		
"The number of votes cast for the amendment(s) was/were sufficient for approval			
by	; .		,
(voling group)	٠,	•	
The amendment(s) was/were adopted by the board of directors without shareholder action and action was not required.	shareholder		
The amendment(s) was/were adopted by the incorporators without shareholder action and shar action was not required.	reholder		 5
Dated April 20, 2015		•	
Signature Signature		e e	
(By a director, president or other officer – if directors or officers hav selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)			•
Tarek Aly		<u>.</u>	
(Typed or printed name of person signing)			
President	•		•
(Title of person signing)		•	