

P03000040112

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

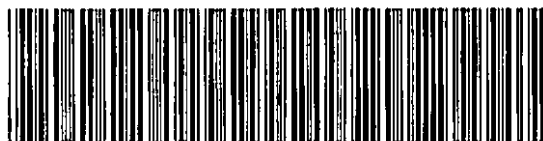
(Document Number)

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2022 NOV 28 AM 11:37  
SECRETARY OF STATE  
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: BELMAR WINDS, INC.

DOCUMENT NUMBER: P03000040112

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SOFIYE WILLIAMS  
Name of Contact Person  
SOFIYE WILLIAMS, P.A.  
Firm/ Company  
500 E. BROWARD BLVD., STE. 1710  
Address  
FORT LAUDERDALE, FL 33394  
City/ State and Zip Code  
SOFIYE@COMCAST.NET  
E-mail address\* (to be used for future annual report notification)

For further information concerning this matter, please call:

SOFIYE WILLIAMS at ( 954-397-5731 )  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |                                                     |                                                                        |                                                                                                     |                                                                                                                            |
|-----------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|-----------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

Mailing Address  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
2022 NOV 28 AM 11:33  
SECRETARY OF  
TALLAHASSEE, FL

BELMAR WINDS, INC.

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

P03000040112

(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)

Belmar Winds, Inc.

341 Nottingham Blvd.

West Palm Beach, FL 33405

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

Belmar Winds, Inc.

198 Lafayette Place

Englewood, NJ 07631

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 Sofiye Williams, P.A.

500 E Broward Blvd., Ste. 1710

(Florida street address)

New Registered Office Address: Fort Lauderdale \_\_\_\_\_, Florida 33394

(City)

(Zip Code)

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.

*Sofiye Williams*  
\_\_\_\_\_  
Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1)(c), F.S.

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:

☒ Change                      PT              John Doe

☐ Remove                      V              Mike Jones

☐ Add                      SV              Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>P</u>	<u>Varoujan Khorozian</u>	<u>198 Lafayette Place</u>
<input checked="" type="checkbox"/> Add			<u>Englewood, NJ 07631</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>D</u>	<u>Gioele Montagna</u>	<u>341 Nottingham Blvd.</u>
<input checked="" type="checkbox"/> Add			<u>West Palm Beach, FL 33405</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>P</u>	<u>Teresa Santalucia</u>	<u>3570 S Ocean Blvd, Unit 807</u>
<input type="checkbox"/> Add			<u>Palm Beach, FL 33480</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

*[The page contains faint horizontal lines, suggesting it was part of a lined notebook or document.]*

[illegible]

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed

Effective date if applicable: \_\_\_\_\_

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required

☐ The amendment(s) was/were adopted 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)

Dated 10/31/2022

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)

VAROUJAN KHOROZIAN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)