## P03000 139 745

(Re	equestor's Name)			
(Ad	dress)			
(Ad	dress)	<u>-</u>		
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



800332674048

08/08/19--01028--014 \*\*52.50

2019 AUG -8 PM 1:24

AUG 1 4 2019 C Kinsey

## **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: Chris Barganier Window Covering Installation + Repair, DOCUMENT NUMBER: PO3000139745
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Chris R. Barganier  Name of Contact Person  Chris Barganier Window Covering Installation + Repair, Inc.,  Firm Company  7065 Winding Lake Circle  Address  Oviedo, FL 32765  City/ State and Zip Code  Charganier abell south, net  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chris Barganier at 407, 491-7512  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:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)

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

TO: Amendment Section

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

to Articles of Encorporation

Articles of Inco			
Chris Barganier Window Cove	ering Installa	tion + Repair	Inc
P03000139745			
(Document Number of	f Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation a	dopts the following amendme	:nt(s) to
A. If amending name, enter the new name of the corporation:	^		
	<u>NA</u>	The new	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association." or the abbreviation B. Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	Co . A projectional se y	noraled" or the appreviation ration name must contain the	ı e
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	2019 AUG - 8 SECTIVE HAR	
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre-	dress in Florida, enter the n	ame of the	
(Florida s	street address)		
New Registered Office Address:		, Florida	<b>-</b> -
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia	r with and accept the obligat		
. Signature of New	v Registered Agent, if changir	ıg	

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: John Doe PT X Change Mike Jones V X Remove SV Sally Smith X Add Address Name Type of Action <u>Title</u> (Check One) 1) \_\_\_\_ Change Remove 2) \_\_\_\_ Change \_\_ Add \_\_ Remove 3) \_\_\_\_ Change \_ Add \_\_ Remove Change \_\_\_\_ Add \_\_\_ Remove 5) \_\_\_\_ Change \_\_\_\_ Add .\_\_\_ Remove 6) \_\_\_\_ Change \_\_\_ Add

\_ Removo

	s, if necessary). (Be specific)
	NA
	·
· · · · · · · · · · · · · · · · · · ·	
	,
· · · · · · · · · · · · · · · · · · ·	ovides for an exchange, reclassification, or cancellation of issued shares,
nrovisions for impl	lementing the amendment if not contained in the amendment itself:
(if not applicab	le, indicate N/A)
	NIN.
(i) noi applicati	NA.
(y noi applicao	
(i) noi applicat	
(i) noi applicati	
(y noi appiicao	
(i) noi applicab	
(i) noi applicati	
(i) noi applicati	
(i) noi applicati	
(i) noi applicab	
(y noi appacao	
(y noi appacao	

	7/29/2019	, if other than the
The date of each amendment(s) adopti date this document was signed.	8/15/2019	
Effective date if applicable:	(no more man 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	t does not meet the applicable statutory filing requirement ment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffice	d by the shareholders. The number of votes east for the ameient for approval.	endment(s)
The amendment(s) was/were approvement be separately provided for each	ved by the shareholders through voting groups. The following the voting group entitled to vote separately on the amendment	ng statement nt(s):
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
b	£ (voting group)	
The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and	shareholder .
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and share	eholder
Dated	7/29/2019	
Signature	hris R. Bargamer	
(By a dire	sciol blesidest of office differ by the cons or others have	e not been
	by an incorporator – if in the hands of a receiver, trustee, or if induciary by that fiduciary)	Other Court
прошин	Chris R. Barganier	
_	(Typed or printed name of person signing)	
	President	·
_	(Title of person signing)	