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COVER LETTER

Division of Corporations Custom Exteriors and Storm Protection Inc. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Robert Steele Name of Contact Person Custom Exteriors Firm/ Company 2219 SW 14th Pl. Address Cape Coral Fl. 33991 City/ State and Zip Code customextswfl@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Bob Steele** Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

TO: Amendment Section

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 of

			of State)	
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	Articles of A		E.	12
	Articles of Inc	corporation	5	
stom Exteriors and Storm	of		3	Ç.
Storn Extendes and Storn		ly filed with the Floride Dent	of State)	<u> </u>
-0496656	POZOO	<u> ハ </u>	or state)	
	(Document Number o	of Corporation (if known)		
suant to the provisions of se Articles of Incorporation:	ection 607.1006, Florida Statutes, this	Florida Profit Corporation add	opts the following amendmen	ıt(s) to
If amending name, enter t	he new name of the corporation:			
			The new	
orp.," "Inc.," or Co.," or rd "chartered," "profession Enter new principal office	and contain the word "corporation the designation "Corp," "Inc." or "al association," or the abbreviation "address, if applicable: TBE A STREET ADDRESS	'Co". A professional corporati	ion name must contain the	
Enter new mailing address				
(Mailing address MAY BE	A POST OFFICE BOX			
				
			· · · ·	
	d agent and/or registered office add		of the	
new registered agent and/	or the new registered office address	<u>u</u>		
Name of New Register	ed Agent			
		reet address)	I	
	(Florida str	reet address)		
New Registered Office	Address:	(City)	Florida	
		(Supp	(104) 30000	
w Registered Agent's Signs	nture, if changing Registered Agent at as registered agent. I am familiar v	i	of the position	
л соу чесері іне арроінітен	i da registerea agent. Tam jamittar s	энн ини ассерт те опиданопs	ој те розитон.	
			I	
		Registered Agent, if changing 🥏	Į.	

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>	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	. <u>Name</u>	<u>Addres</u> s
1) Change	vice p	Patricia Anne Steele	2219 SW 14th Place,
x Add			Cape Coral Fl. 33991
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		11	
Add			
Remove			
6) Change			
Add			
Remove			

F	 If amending or adding addit	ional Articles, enter change(s) here:
	(Attach additional sheets, if ne	cessary). (Be specific)
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F.	If an amendment provides for	or an exchange, reclassification, or cancellation of issued shares,
	(if not applicable, indica	g the amendment if not contained in the amendment itself:
	(у пот аррпсате, така	(10A)
		<u> </u>
	<u> </u>	
		H .

The date of each amendment(s) date this document was signed.	adoption:, if other than the
· ·	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be listed as the begartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) fulficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(in the second s
	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
12-8-201 Dated	
Signature	Robin a Steele
	director, president or other officer - if directors or officers have not been
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court
арро	inted fiduciary by that fiduciary)
	Robert R. Steele
	(Typed or printed name of person signing)
	President
	(Title of person signing)
	President