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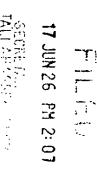
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Certified Copies	_ Certificates	of Status
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JUN 2 6 MY S. PRATHER

COVER LETTER

10: Amendment Section Division of Corporations
NAME OF CORPORATION: BALE ASSOCIATES, INC. DOCUMENT NUMBER: PO400034268
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHARLES A BALE Name of Contact Person
Name of Contact Person
BALE ASSOCIATES, INC D/B/A CVISTOM DOOR SHOP FIRM/Company 126 CENTER ST. STE B9 Address
Firm/ Company
126 CENTER ST. STE.B9
1 1011 200
City/ State and Zip Code
City/ State and Zip Code
Chuckbeaustandoorstaf.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (56) - 741-060 3 Area Code & Daytime Telephone Number
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:
\$3.5 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy

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

is enclosed)

Articles of Amendment to Articles of Incorporation of

BALE ASSOCIATES, INC.		
(Name of Corporation as currently	filed with the Florida Dept. of State)
P04000034268		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this Fl its Articles of Incorporation:	lorida Profit Corporation adopts the f	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation, "Corp," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P	o". A professional corporation nam	r the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		TALE 17
		JUH 26
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		2:
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent		
name of the Regimental Ligent		
(Florida sprée	California	
11 William Street	r tana essy	
New Registered Office Address:	, Florida_	27 (* 1.)
, C	Nay)	(Zīp Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the pe	osition.
Signature of New Res	gistered 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:

 $P \sim President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR + Trustee; C = Chairman or Clerk; CEO + Chief Executive Officer; CFO + Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held, President, Treasurer, Director would be PTD.$

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>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D/P	CHARLES A BALE	126 CENTERST.
Add	,		SVITE B9
Remove			JUPAR, FL 33458
2) Change	DVP	HILLARY J. BALE	SAME AS ABOVE
Add			
Remove	D/VP/T	ANDREN I BALE	SAME AS ABOVE
3) Change Add			
Remove			
4) Change	D/P/S	KALL E. VENVTI	SAME AS ARONE
✓ Add	•		
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ng additional Articles, enter change(s) here:
tach additional she	ets, if necessary). (Be specific)
	<i>)</i>
· · ·	

7	
	.
an amendment pr	ovides for an exchange, reclassification, or cancellation of issued shares,
rovisions for imple	ementing the amendment if not contained in the amendment itself:
(if not applicabl	e, indicate N/A)
73	

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n document's effective date on the Department of State's records	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	17 JUN 26
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	26 P
Dated6/20/17	PN 2:07
Signature Mulle Ci. Falls	•••
(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)	
CHARLES A BAVE	
(Typed or printed name of person signing)	
PRESIDENT	<u></u>
(Title of person signing)	