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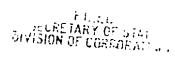
TO: Amendment Section Division of Cornerations 288 JUL 25 AM 11: 62

is the state of th	
NAME OF CORPORATION:	Door Systems, Inc
DOCUMENT NUMBER: PO 40000	
The enclosed Articles of Amendment and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
	David Eckes
	Name of Contact Person Al Arra Systems Tac
	Al Door Systems, Inc. Firm/Company
	00 Cr 13 · W, Address
5 <i>t.</i> ,	Address Augustine, FL. 32082 Cityl State and Zip Code
	City/ State and Zip Code
E-mail address: (to be us	C Al doors inc. com sed for future annual report notification)
For further information concerning this matter, pleas	se call:
David Eakes	at (904) 327 - 7206 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:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
 <u>Mailing Address</u>	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee Fl 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation of



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H-/ Door Systems, a	THE SOLES ANII: 62
(Name of Corporation as currently fil	ed with the Florida Dept. of State)
<u> </u>	<u></u>
(Document Number of Co	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s)
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 "Co" word "chartered," "professional association," or the abbreviation "P.A	"company," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
1	,
-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
-	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	
(Florida street a	1 haven
) (Fiorita Mrevi a	uaress)
New Registered Office Address:	, Florida
(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.
· 	
Signature of New Regis	tered 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 = 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:	more, una sury smar		
X Change	<u>PT John I</u>	<u> 20c</u>	
X Remove	<u>V</u> <u>Mike</u> .	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally S</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Other	Raimondo S.	Buten 2948 Woodward Alte Suit 300
Add			_Suit 300
X Remove			Royal Ock, M. 48073
2) Change	<u>V.P.</u>	Paul M. Dol	Suite B.
_X Add	(Vite Busiden	7)	Suite B.
Remove			Ock Park, MJ. 48237
3) Change			
Add			<u> </u>
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>f amending :</u> Attach <i>additi</i> e	or adding additional Articles, enter change(s) here: onal sheets, if necessary). (Be specific)	
		-
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rovisions fe	nent provides for an exchange, reclassification, or cancellation of issued shares, or implementing the amendment if not contained in the amendment itself:	
(if not a	plicable, indicate N/A)	
	1	
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The date of each amendment(s) adoption: 7/12/18 , if other than the
date this document was signed.
Effective date if applicable: 7/12/18
(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 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 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.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
7/12/18
Dated
Signature 121 Aft C
Signature (By adrector, 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)
(Typed or printed name of person signing)
(Typed or printed name of person signing)
Prosident
(Title of person signing)