## P04000127997

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## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Smart Shade Structures Inc DOCUMENT NUMBER: P04000127997
DOCUMENT NUMBER: P64000 127997
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
VIVIAN SUAREZ  Name of Contact Person
Firm/ Company
1972 NW 50 ST Address
Address
MIAMI FL 33166  City/ State and Zip Code
City/ State and Zip Code
VIVIAND Smart shade Structures. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
VIVIAN SUATEZ at (786) 326 4560  Name of Contact Person 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:
\$35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed)  \$35 Filing Fee & S43.75 Filing Fee & Certified Copy Certificate of Status (Additional copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment** to Articles of Incorporation

FILED

2021 AUG 24 AM 11: 21

SMART SHADE STRUC	TURES INC
(Name of Corporation as cui	rrently filed with the Florida Dept. of State RY OF STATE
	17 144.1
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>on:</u>
Smart shade syste	MS Inc The new
name must be distinguishable and contain the word "corporatio	on," "company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent	
(Flori	ida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	Agent:
тистоў чесері те арропатела аз гезіліегей адет. Тат заті	шаг жил ана ассері іне овиданоня ој іне position.
Signature of N	New Registered Agent, if changing
·	

Check if applicable
The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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: XChange	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change		_	± ± ± 1	
Add				
Remove				Part Market, viv. 1
2) Change		_		
Add				
Remove 3 ) Change	<u></u>			
Add				
Remove				
4) Change				
Add				
Remove				
Change				
Add		<del>_</del> -		
Remove				
6) Change				
Add		_		
Remove				
Remove				

Attach <i>ac</i>	ing or adding additional ditional sheets, if necess	ary). (Be specific	<del></del>			
	<del></del>			·		
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				***		
lf an am	endment provides for a	n exchange, reclass	sification, or can	cellation of issue	d shares,	
provisio	ns for implementing the	e amendment if no	t contained in th	ie amendment its	elf:	
(if n	ot applicable, indicate N	/A)				
	<u> </u>					
<del></del>						
					· - · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) ad date this document was signed.	option: <u>406,23,2021</u>	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file o	
	(no more than 90 days after amendment file o	date)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requires partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	sted by the incorporators, or board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes cast for the ficient for approval.	e amendment(s)
	oved by the shareholders through voting groups. The foll ach voting group entitled to vote separately on the amend	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
(By a dir	23, 2021 ector; president or other officer – if directors or officers h	ave not been
seleçfed. appointe	by an incorporator – if in the hands of a receiver, trustee, d fiduciary by that fiduciary)	, or other court
_	JOSE A. SUAREZ (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
_	President	
_	(Title of person signing)	