

P05000/04833

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ABC Blinds and Hurricane Shutters Inc.

DOCUMENT NUMBER: P05000104833

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bebe Numa, President

(Name of Contact Person)

ABC Blinds and Hurricane Shutters Inc.

(Firm/ Company)

15986 Northwest 48 Avenue

(Address)

Miami Gardens, Florida 33014

(City/ State and Zip Code)

For further information concerning this matter, please call:

Bebe Numa, President

(Name of Contact Person)

at (954) 274-9178

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
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(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

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

Articles of Amendment
to
Articles of Incorporation
of

ABC Blinds and Hurricane Shutters Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P05000104833

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

- ✓ Article....V.....is amended to delete (P)/(D) Timothy Arrington as
President/Director of ABC Blinds and Hurricane Shutters, Inc., and to
elevate Beby Numa to the Position of President/Director of ABC Blinds
and Hurricane Shutters, Inc. Beby Numa Address -15986 NW 48 Ave
MIAMI GARDENS, FL 33014
- ✓ Article...8.....is entered to name Beby Numa as Registered Agent
of ABC Blinds and Hurricane Shutters, Inc.

see additional Page.

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: August 21st, 2006

Effective date if applicable: August 21st, 2006
(no more than 90 days after amendment file date)


Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were approved 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.

Signature 
(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)

Beby Numa
(Typed or printed name of person signing)

President
(Title of person signing)

FILING FEE: \$35

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Registered Agent

Having been named as registered agent to accept service for the above stated corporation
at the place designated in this certificate, I am familiar with and accept the appointment
as registered agent and agree to act in this capacity.

Bebe Numa, 15986 NW 48 Avenue, Miami Gardens, Florida 33014

SIGNED:  _____
Bebe Numa