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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Romano	Shutters company
DOCUMENT NUMBER: P050 00 155	
The enclosed Articles of Amendment and fee are sub	omitted for filling.
Please return all correspondence concerning this matt	er to the following:
Isabelle Ro	Mane of Contact Person
Romano Shu	Hers Company Firm Company
711 NE 25#	Ave. +2 Address
Cape Coral	F1 33909 City/ State and Zip Code
Romanoshytters	QOL.Com ed for future annual report notification)
For further information concerning this matter, please	e call:
Isabella Romano Nume of Contact Person	at (239) 458 - 9440 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
S35 Filing Fee	□\$43,75 Filing Fee & □\$52,50 Filing Fee Certified Copy (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

Romano Shytters company (Name of Corporation as currently	filed with the Florida Dept. of State)
n	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A name must be distinguishable and contain the word "corporation	Thenew
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 "I	?o". 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>)	
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:	ess in Florida, enter the name of the
Name of New Registered Agent //A	
tFlorida stre	et address)
New Registered Office Address:	, Florida
	· · · · · ·
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
Signature of New Re	rgistered 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: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type_of Action (Check One) 1) Change AddX Remove	Ming Dirac Dalip Singh	Address 711 NE 25th Ave #2 Cape Coral F1 33909
2) Change Add		
Remove 3) Change Add		
Remove 4) Change Add		
Remove Change Add		
Remove 6) Change Add		
Remove		

(Attach additional sheets, if necessary).	eles, enter change(s) here: (Be specific)	
NIA		
		
	.	
 		
If an amendment provides for an exch provisions for implementing the amer	inge, reclassification, or cancellidate in the ar	ation of issued shares, mendment itself:
(if not applicable, indicate N/A)		
NIA		
		
	_	
<u> </u>		

The date of each amendment(s) ad	option:7-10-18	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	7-10-18 (no more than 90 days after amendment file	
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing require partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted 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 each voting group entitled to vote separately on the amen	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action a	and shareholder
☑ The amendment(s) was/were adopted action was not required.	oted by the incorporators without shareholder action and s	hareholder
Dated 7- 11	-18	
	T)	
Signature	The contract of the contract o	
	rector, president or other officer - if directors or officers h	
	, by an incorporator – if in the hands of a receiver, trustee a fiduciary by that fiduciary)	. or other court
• •		
_	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
-	(Title of person signing)	