## P0600005520

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	y/State/Zip/Phone	<b>⇒</b> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300066728253

03/01/06 -01027--001 \*\*43.75

TALLAHASSEE, FLORIDA

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Design Pro Aluminum INC.		
DOCUMENT NUMBER: GOODI 9 00058		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
CARIA SUMMER (Name of Contact Person)		
Dusign - Pro Aluminum Inc.		
4001 Exchange AVE (Address)		
MONES TI. 3410  (City/ State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (139) 450-5797 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
S35 Filing Fee Certificate of Status  S43.75 Filing Fee & Certificate of Status  Certificate of Status  (Additional copy is enclosed)  S52.50 Filing Fee & Certificate of Status  Certified Copy (Additional Copy is enclosed)		
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of
(Name of corporation as currently filed with the Florida Dept. of State)
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> 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)
Caparation ADDRESS Shall BES THE TO HOOL Exchange AUD THE TO BAD THE TO BE T
DADISS TI. 34104 3
ADD NEW OFFICER & Christopher Cocchi - Addres 1001 1587-600 Coponation TITLE IS CLERK  (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)
RENTH SOMMER SO Shores
Christopher Corch i LO Shares

The date of each amendment(s) adoption:
Effective date if applicable: (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)  (Typed or printed name of person signing)  (Title of person signing)

FILING FEE: \$35