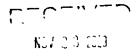
P06000047030

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #/)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
(2-	,	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



000355578910



11/34/20--01015--013 **35.00

S. YOUNG AHII: 47

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations M. A.W. Installations, Inc. NAME OF CORPORATION: P060000 47030 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ernstein Accountir risha@ bernsteintax.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 627-1489

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment

Articles of Incorporation

, of

M. A.W. Installation	ns, Inc.		
(Name of Corporation as current	ly filed with the Florida Dept. of Sta	<u>ite</u>)	
po 40000 470	030		
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts th	e following ame	ndment(s) to
A. If amending name, enter the new name of the corporation:			
N/A		The	new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name m	abbreviation "Coust contain the	orp.," word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NIA		
		2019	— — _
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7: 8	13 - 24 1 - 1 2444 5 2444 5
		3m 10 a 0 2 4	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		3. 3.	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		<u>1e</u>	ł
Name of New Registered Agent	NIA		
(Florida st	reet address)		
New Registered Office Address:	Florid		
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar		position.	
	n/A		
Signature of New I	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)

Example:

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.

X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
!) Change	VP Troy Scude	
X_ Add		#367
Remove		Winter Park FI 32792
2) Change		
Add		
Remove 3) Change		
Add		
Remove		.
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

ttach <i>addition</i>	r adding additional Art nal sheets, if necessary).	(Be specific)	10 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m			
	~ N/A					
-						
		_				
	-				-	•
					· · · · · · · · · · · · · · · · ·	
					<u> </u>	
				<u></u>		
						-
-		_		-	<u>-</u> ,	
· -				_	-	

-						
an amendme	ent provides for an excl	hange, reclassific	ation, or cancel	lation of issued	shares	
<u>rovisions for</u>	implementing the ame dicable, indicate N/A)	endment if not co	ntained in the a	mendment itse	elf:	
	NIA					
		<u> </u>		·-		
	<u>.</u>			_		
-				 .		

.

The date of each amendment(s) ad-	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file de	ite)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	eted by the incorporators, or board of directors without share	reholder action and shareholder
☐ 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.	amendment(s)
	oved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amenda	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated//-	Michael Wisman	
Signature	michael Wisman	
(By a dir selected	ector, president or other officer – if directors or officers ha by an incorporator – if in the hands of a receiver, trustee, d fiduciary by that fiduciary)	
	Michael A. Wisman	
-	(Typed or printed name of person signing)	
	President	
_	(Title of person signing)	-