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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

AME OF CORPORATION: WINDOW WORLD OF Melbourne Inc.
DOLUMENT NUMBER: P600103158
e enclosed Articles of Amendment and fee are submitted for filing.
case return all correspondence concerning this matter to the following:
Name of Contact Person Window World of Melbourne Inc Firm/Company 4968 Wexford Dr. Address Rockledge FL 32955 City/State and Zip Code Wilcox 4352@bell50uth.net E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
LAURIC WILCOX at (321) 690-4352 Name of Contact Person Area Code & Daytime Telephone Number aclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment

to

Articles of Incorporation	
Window World of "Melbo	urne_
(Name of Corporation as currently filed with the Flo	rida Dept. of State)
P6000103158	
(Document Number of Corporation (if known)	own)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corp</i> its Articles of Incorporation:	noration adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: M	The new ''incorporated' or the abbreviation
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A profession word "chartered," "professional association," or the abbreviation "P.A."	al corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18 SEP - 7
D. If amending the registered agent and/or registered office address in Florida, entended registered agent and/or the new registered office address: Name of New Registered Agent Name of New Registered Agent	er the name of the
(Florida street address)	
New Registered Office Address: (City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the	obligations of the position.
Signature of New Registered 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	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Si	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add	-			
Remove				
5 (2)				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remare				

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nge, reclassificati	ion, or cancella	ition of issued	d shares.	
ament ii not conti	ained in the an	nenament use	<u>::::</u>	
.				
				
	nge, reclassificat Iment if not cont	nge, reclassification, or cancella	nge, reclassification, or cancellation of issued	nge, reclassification, or cancellation of issued shares. Iment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted 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)	
(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.	
Dated 9 - 4 - 18	
Signature Harvie W DiDCOV	
(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)	
Laurie Wilcox (Typed or printed name of person signing)	
President (Title of person signing)	