## Florida Department of State

**Division of Corporations** Public Access System

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000062062 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

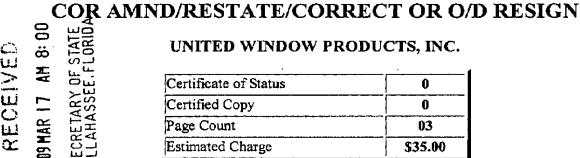
From:

Account Name : CSH SERVICES, LLC

Account Number: I2007000016C (800) 494-3124 Phone

Fax Number

: (561)455-9885



## UNITED WINDOW PRODUCTS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

**PLOS** T T 8009



H090000620623

## Articles of Amendment to Articles of Incorporation of

RODUCTS, INC. led with the Florida Dept. of S	itate)					
ed with the Florida Dept. of S	tate)					
P06000118707						
(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:						
rporation:						
or Co.," or the designation	"Corp," "Inc," or	•				
		_				
RESS)						
x)		OS MAR 17				
		RPORATI				
ed office address in Florida, e office address:	nter the name of th	<u>ie</u> 22				
(Florida street address)	_					
	, Florida					
(City)	(Zip Code)					
stered Agent:						
	corporation (if known) ida Statutes, this Florida Profit:  reporation:  Itain the word "corporation," or Co.," or the designation contain the word "charter"  RESS)  ed office address in Florida, enfice address:  (Florida street address)	Corporation (if known)  ida Statutes, this Florida Profit Corporation adoptic  reporation:  Itain the word "corporation," "company," or or Co.," or the designation "Corp," "Inc," or contain the word "chartered," "professional "RESS")  RESS )  ed office address in Florida, enter the name of the office address:  (Florida street address)  (City) (Zip Code)				

Signature of New Registered Agent, if changing

H09000062062:3

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)

Tit	<u>le</u>	Name	Address	Тур	e of Action
VP	·	BRYAN BALDOCCHI	11900 LOXAHATCHEE RD PARKLAND, FL 33076		Add Remove
	<del></del>	· · · · · · · · · · · · · · · · · · ·			Add Remove
					Add Remove
E. <u>1</u>	lf amending ntiach addit	or adding additional Articles, enter el lonal sheers, if necessary). (Be specific	nange(s) here:		
				-	
f.	provisions	dment provides for an exchange, reclas for implementing the amendment if no pplicable, indicate N/A)	isilication, or cancellation of issuit contained in the amendment is	i <u>ed s</u> self:	liares,

H090000620623.

The date of each amend	ment(s) adoption: <u>1/8/2008</u>
Effective date <u>if applica</u>	ble: (no more than 90 days after amondment file date)
	(no more man 20 days after amandment file date)
Adoption of Amendmer	et(s) (CHECK ONE)
The amendment(s) we by the shareholders w	as/were adopted by the shareholders. The number of votes cast for the amendment(s) as/were sufficient for approval.
	as/were approved by the shareholders through voting groups. The following statement ovided 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	74
	(voting group)
The amendment(s) we action was not require	as/were adopted by the board of directors without shareholder action and shareholder ed.
The amendment(s) we action was not require	as/were adopted by the incorporators without shareholder action and shareholder ed.
Dated_	1/8/2008
Signan	ure La
	(By a director, president or other officer - if directors or officers have not been solected, by an incorporator - if in the hands of a receiver, trustee, or other court
	appointed fiduciary by that fiduciary)
	WILLIAM J WILLARD
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)