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(Red	questor's Name)	
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COVER LETTER

Division of Corporati	ions		
NAME OF CORPORAT	DATAN	2 Windows :	E Doors Inc
The enclosed Articles of A	Amendment and fee are sub	omitted for filing.	
Please return all correspor	ndence concerning this mat	ter to the following:	
	Tool 4	Name of Contact Person	
 	4530 5. Ocala	Firm/ Company E 1446 Address City/ State and Zip Code	71
E-mail address: (to be used for future annual report notification)			
For further information ed	oncerning this matter, pleas	e call:	
Total U. I	TIZO Contact Person	at (727 Area Coo	de & 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 & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mailin</u>	g Address	Street	Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(<u>Name o</u>	f Corporation as currently	filed with the Florida Dept. of State)	
PRISTINE WINDOWS 🛨 DOORS IN	IC.		
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, this F	Ilorida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associate	ation "Corp," "Inc," or "C	" "company," or "incorporated" or the al co". A professional corporation name must of P.A."	_The new bbreviation contain the
B. Enter new principal office address, (Principal office address MUST BE A ST	if applicable: TREET ADDRESS)		
C. Enter new mailing address, if appliance (Mailing address MAY BE A POST of	<u>cable:</u> OFFICE BOX)		
D. If amending the registered agent an new registered agent and/or the new	d/or registered office addre w registered office address:	ess in Florida, enter the name of the	
Name of New Registered Agent	TODD W. GIZA		_
	4530 SE 14TH ST.		
New Registered Office Address:	(Florida stre	et address)	- 22
New Registered Agent's Signature, if c	hanging Registered Agent:	HVSSEE'	Gede) The second of the second

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.

X Change	<u>PT</u> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	STEVEN L. GIZA	2697 NE 60TH LN
Add			OCALA, FL 34479
XX Remove			
2) Change			
Add			4.
Remove			
3) Change	 -		
Add			
Remove			
4) Change			,
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding ad Attach <i>additional sheets, ij</i>	f necessary). (Be	e specific)			
					,, ,
	_				
					····
	t				
f an amendment provide provisions for implement (if not applicable, in	nting the amendm	e, reclassification	on, or cancellation ined in the amen	n of issued shares dment itself:	<u>.</u>
	····				<u> </u>
		<u> </u>			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
JANUARYY 1, 2017 Effective date <u>if applicable</u> :	
(no more than 90 days a	fter amendment file date)
Note: If the date inserted in this block does not meet the applicable stat document's effective date on the Department of State's records.	tutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voti must be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were suffici	ent for approval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without action was not required.	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shar action was not required.	eholder action and shareholder
Dated 2/7/2017	
Signature (By a director, president or other officer – if of selected, by an incorporator – if in the hands appointed fiduciary by that fiduciary)	
(Typed or printed name of	Person signing)
President (Title of perso	E Director
(interior perso	11 315111115)