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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Pristing Windows & Door, INCOMENT NUMBER: P07000 3398
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Todd GIZA
Pristing Windows + Doors Firm/Company
4530 SE 14th Street
Ocala 72 34471
City/ State and Zip Code Pristing WBC Yahoo. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Todd G12A at (352) 644-1914 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed 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) S52.50 Filing Fee Certified Copy (Additional Copy is enclosed) 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

Tallahassee, FL 32314

Articles of Amendment

to

Articles of Inco	rporation		
Pristine Win	DOWS + DOO	RS FAC.	
(Name of Corporation as currently	filed with the Florida Dept. o	f State)	
P070000	33398		
(Document Number of	Corporation (if known)		_
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adop	ots the following amend	dment(s) to
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "F	o". A professional corporatio	ted" or the abbrevia	
B. Enter new principal office address, if applicable:	NA	201 SF	
(Principal office address MUST BE A STREET ADDRESS)		产品 臺	
		<u> </u>	3
C. Enter new mailing address, if applicable:		₩ 9 3	i.i.l
(Mailing address MAY BE A POST OFFICE BOX)	-NA	ကြုတ္ တွ	
		구품 37	
			_
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name	of the	_
Name of New Registered Agent		_	
tFlorida stree	4 address)		
New Registered Office Address:		lorida	_
16	Titys	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:			
Thereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of	f the position.	

Signature of New Registered Agent, if changing

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: <u>X</u> 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>	Address
1)Change	CFO Debra Knowd	2313 NE 374/5/treat
Add Remove		<u> </u>
2) Change	U Thomas Knowd	2313 NE 374h Street Ocala, 7134479
Remove 3) Change Add		
Remove		
4) Change Add		
Remove		
5) Change Add		
Remove		
6) Change Add		
Remove		

If an amendment provides for an 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) NA	. If amending or adding (Attach additional shee	ts, if necessary). (Be specific)	(3) 11¢1 ¢.			
If an amendment provides for an 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)	(,,				
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The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:	······
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)	
☐ 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 5-3-19	
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)	_
Todd G1ZA (Typed or printed name of person signing)	
Procine NT	
(Title of person signing)	