P08000015432

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



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | ATION: MARCO GLASS | & MIRROR CORP. | | |
|---------------------------|---|--|---|--|
| DOCUMENT NUMBE | P08000015432 | | | |
| The enclosed Articles of | Amendment and fee are su | bmitted for filing. | | |
| Please return all corresp | ondence concerning this ma | tter to the following: | | |
| ٨ | MARCO A LARICE | | | |
| | | Name of Contact Persor | 1 | |
| M | IARCO GLASS & MIRRO | R CORP. | | |
| _ | | Firm/ Company | | |
| 1 | 781 NE 145Th STREET | , , | | |
| | - - | Address | | |
| N | IORTH MIAMI, FLORIDA | 33181 | | |
| _ | | City/ State and Zip Code | 2 | |
| marcol | arice@bellsouth.net | | | |
| V | E-mail address: (to be us | sed for future annual report | notification) | |
| | | · | | |
| For further information | concerning this matter, pleas | se call: | | |
| Marco A Larice | | 786 | 285-5555 | |
| Name of | Contact Person | Area Code & Daytime Telephone Number | | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | artment of State: | |
| S35 Filing Fee | Salantian Status Status Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Amen Divisi P.O. 1 | ng Address dment Section on of Corporations 30x 6327 nassee, FL 32314 | Amend Divisio The C | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| | 01 | | | |
|---|--|------------------------------|---|----------------|
| MARCO GLASS & MIRROR CORP. | | | | |
| (Name o | of Corporation as currently | filed with the Florida Dept | t. of State) | |
| P08000015432 | | | | |
| | (Document Number of | Corporation (if known) | | |
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this Fa | lorida Profit Corporation ac | dopts the following ar | mendment(s) to |
| A. If amending name, enter the new na | ame of the corporation: | | | |
| ARCO GLASS INVESTMENTS, COR | P. | | 77 | ic new |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "chartered," "professional association," B. Enter new principal office address, (Principal office address MUST BE A Section of the Enter new mailing address, if application address MAY BE A POST (Mailing address MAY BE A POST) | Torp, ""Inc, " or "Co". A or the abbreviation "P.A." if applicable: TREET ADDRESS) | | DA 33181 DA | |
| D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent | w registered office address: Glenchiver C Larice | ss in Florida, enter the nar | me of the | |
| | 1781 NE 145Th STREET | | | |
| New Registered Office Address: | (Florida stree NORTH MIAMI, FLORIDA | | . Florida | |
| New Registerea Office Address: | (City) | | _, r fortga(Zip Cod | e) |
| | | | | |

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>РТ</u> | John Doc | |
|---|--------------|---|--|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | ٧ | Glenchiver C Larice | 1781 NE 145TH ST |
| X | | | NORTH MIAMI, FL 33181 |
| Remove | | | |
| 2) Change | | _ | |
| Add | | | |
| Remove Change | | | 20H |
| Add | | | CRE TO THE CONTRACT OF THE CON |
| Remove | | | 正是 |
| 4) Change | | | 1 |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |
| | | Page 2 of 4 | |
| E. If amending or addit (Attach additional she | | onal Articles, enter change(s) here: cessary). (Be specific) | |

(it aprecise)

| F. 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) | 2019 DEC -9 PM 12: 49 SECRETARY OF STATE TALLAHASSEE, FL | |
|---|--|----------|
| Page 3 of 4 | | |
| NOVEMBER 30, 2019 | | |
| date this document was signed. | , if other | than th |
| Effective date if applicable: DECEMBER 03, 2019 | | <u>-</u> |

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | | | | |
|---|---|-------------------------------------|--------|----------------------|--------|
| ■ The amendment(s) was/were ac by the shareholders was/were: | dopted by the shareholders. The num sufficient for approval. | ber of votes east for the amendm | ent(s) | | |
| | pproved by the shareholders through or each voting group entitled to vote s | | tement | | |
| "The number of votes car | st for the amendment(s) was/were suf | ficient for approval | | | |
| by ARCO A LARICE | (PRES.) | | | | |
| • | (voting group) | ; | | | |
| action was not required. | dopted by the board of directors withed | | | | |
| Dated_DECEM | BER 03, 2019 | 11 | | | |
| select | director, president or other officer – ited, by an incorporator – if in the handinted fiduciary by that fiduciary) Marco A Larice (Typed or printed name) | ds of a receiver, trustee, or other | | 2019 DEC -9 PH 12: 4 | , i.e. |
| | (Title of person signing) | | | Ġ | |