P09000018319

•	(Requestor's Name)	
	(Address)	
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	(City/State/Zip/Phone #)	
PICK-UF	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of 3	Status
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Amond & N.C.

AUG 2 0 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORE	PORATION:	Vanguard Window & Door Systems
DOCUMENT NU	MBER:	P09000018319
The enclosed Artic	cles of Amendment and	fee are submitted for filing.
Please return all co	orrespondence concern	ng this matter to the following:
		Gary Gil
		Name of Contact Person
	Van	guard Window & Door Systems
		Firm/ Company
	2881 E	ast Oakland Park Blvd Suite #430
		Address
		Ft. Lauderdale, FL 33306
		City/ State and Zip Code
ARTS ANTEN	E-mail address: (to	be used for future annual report notification)
For further informa	ation concerning this n	natter, please call:
	Gary Gil	at (954) 579-1192 Area Code & Daytime Telephone Number
Name	of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check	k for the following am	ount made payable to the Florida Department of State:
☑ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Statu	
Mailing Address		Street Address
Amendment Section Division of Corporations		Amendment Section Division of Corporations
P.O. Box 6327		Clifton Building
Tallahassee, FL 32314		2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 30, 2009

GARY GIL VANGAURD WINDOWS & DOOR SYSTEMS INC 2881 EAST OAKLAND PARK BLVD., STE 430 FT LAUDERDALE, FL 33306

SUBJECT: VANGAURD WINDOWS & DOOR SYSTEMS INC

Ref. Number: P09000018319

We have received your document for VANGAURD WINDOWS & DOOR SYSTEMS INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 909A00026187

RECEIVED

2009 AUG 19 AM 8: OC
SECRETARY OF STATE
TALEAHASSEE, FLORIO

Articles of Amendment to Articles of Incorporation of

20

Vangaurd Windows& D	oor Systems エル		
(Name of Corporation as currently filed w	vith the Florida Dept. of	State)	
P09000018319			
(Document Number of Corp	ooration (if known)		
Pursuant to the provisions of section 607.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Proj</i>	fit Corporation ad	opts the following
A. If amending name, enter the new name of the corpor	ration:		
Vanguard Window & D	oor Systems INL		The new
name must be distinguishable and contain the word "abbreviation "Corp.," "Inc.," or Co.," or the designation name must contain the word "chartered," "professional as	n "Corp," "Inc," or "Co" sociation," or the abbrev	". A professional iation "P.A."	ed" or the corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	601 NW 12th Av	renue	_
(17 melph office address MODI MATERIAL TIDDICES	Suite # 300		
	Pompano Beach	. FL 33069	
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	601 NW 12th Ave	enue	
	Suite # 300		
	Pompano Beach	. FL 33069	- 0 NS
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		enter the name of	OS AUG 20 AM
			20 F C
Name of New Registered Agent: N/A			3 99 91
New Registered Office Address:	Florida street address)		1 9: 08
		Disaids	o 🧟 -
	City)	, Florida (Zip Code)	,,,
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	familiar with and accept t		he position.
Signature of	New Registered Agent, if c	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)

	Name	<u>Address</u>	Type of Action
SEC	Charles Safdie	21120 Jib Court K-13 Aventura, FL 33180	🖸 Add 🛘 Remove
			
			□ D
			Remove
E. <u>If amend</u>	ling or adding additional Artic	cles, enter change(s) here:	
(attach ad	lditional sheets, if necessary).	(Be specific)	·
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•			·
provisio	ns for implementing the amer	nange, reclassification, or cancellation of adment if not contained in the amendmen	
provisio			
provisio	ns for implementing the amer		
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provisio	ns for implementing the amer		

The date of each amendmen	t(s) adoption: July, 6, CO.
•	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_July Signature	8, 2009
(By	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Gary Gil
	(Typed or printed name of person signing)
	Vice-President
	(Title of person signing)