## P09000020209

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: HEAVENLY Windows & Doors The DOCUMENT NUMBER: PTX10000 20209
DOCUMENT NUMBER: 27×10000 20209
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
RAGUEL ROSALES  Name of Contact Person
Heaverly Windows Door Tree  Firm/Company
3472 Sw 1567
Modeloss
City/ State and Zip Code
City/ State and Zip Code
E-mail address: (To be used for future fannual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (786) 326.4444  Area Code & Daytime Telephone Number
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)  Cartificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallabassee, FL 32301

Articles of Amendment to

of	t hot and
	Door Tue.
(Name of Corporation as currently	filed with the Florida Dept. of State)
P090000 20 a	
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Heavenly Doors INC	The now
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2017MAY SECRET
D. If amending the registered agent and/or registered office address:  Name of New Registered Agent  Name of New Registered Agent	ess in Florida, enter the name of the
(Florida stre	et address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	olth and accept the obligations of the position.
0'	pristaged Apart 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>PT</u>	John Doe		
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>	Address	
l)Change				
Add		•		
Remove				<u> </u>
2) Change				
Add				<del></del>
Remove				
3) Change				
Add				
Remove			· · · · · · · · · · · · · · · · · · ·	
4)Change		·		
Add		•		
Remove				<del></del>
5) Change				
Add			<del></del>	
Remove				
6) Change				
Add				
Remove				<u> </u>

E. If amending or adding additional Articles, enter change(s) here:

(Att	ach additional sheets, if necessary). (Be specific)						
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λ	lew Marie: Heavenl	<u>-</u>	Doors	Trus	CC :		_
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	on amendment provides for an exchange, reclassifications for implementing the amendment if not capplicable, indicate N/A)						<del></del>
							_
							_
					· -		

The date of each amendment(s) add	option: 05/04/3017	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date	)
Note: If the date inserted in this blue document's effective date on the Dep	ock does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	·
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes east for the ame	endment(s)
	oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendmen	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by RAGIRI ROC	(voting group)	,
The amendment(s) was/were adopt action was not required.	oted by the board of directors without shareholder action and s	hareholder
action was not required.	oted by the incorporators without shareholder action and share	holder
Dated 0.5/0	4/2017	
Signature	Life	
(By a dir	ector, president or other officer - if directors or officers have	
	, by an incorporator - if in the hands of a receiver, trustee, or o	other court
appointe	ed fiduciary by that fiduciary)	
_	(Typed or printed name of person signing)	
•	(Typed or printed name of person signing)	
_	RRESident	
·	(Title of person signing)	