P1000012809

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800263679068

09/04/14--01019--017 **35.00

14 SEP -4 PH 12: 49

Clew's

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: SASH INC.
DOCUMENT NUMBER:P10000012809
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ARDELLA SORENSEN
ARC CO.
1949 SAN ROY DR
DUNEDIN FL 34698
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SHAWN SORENSEN a. 727, 560 1072
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:
\$35 Filing Fee Certificate of Status (Additional copy is enclosed) Certificate of Status Certificate of Status Certificate Opy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations

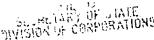
Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

ťΩ

Articles of Incorporation



CFP - 1. PM 12: 49 (Name of Corporation as currently filed with the Florida Dept. of State) 000001280 Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: NA name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: 130 Kenwood AVE (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent New Registered Office Address

New Registered Agent's Signature, if changing Robistered Agent:

I hereby accept the appointment as physically 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.

Mike Jones, V as Remove Example:	e, and Sal	ly Smith,	SV as an Add.	
X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	Y	Mike Jo	<u>nnes</u>	
_X Add	<u>SV</u>	Sally S	nith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	<u>CE</u> (<u>)</u>	HARLEY KINGDON	130 KENWOOD AUE CC 3375
Add Remove				CLEARWATER FL 33755
2) Change	P		SHAWN SORONSEN	1549 San Roy Dr.
Add Remove				FL 34698
3) Change	·			
Add Remove				NA
4) Change		_		
Add Remove				N/A
5) Change		_		
Remove				MA
6) Change		_		
Add Remove				NA

Attach additional shee	g additional Articles, enter change(s) here: ets, if necessary). (Be specific)	
·		
	(1/0	
	$\sim \sim $	
		
·.		
f an amendment prov	vides for an exchange, reclassification, or cancellation of issued shares,	
(if not applicable,	menting the amendment if not contained in the amendment itself: , indicate N/A)	
	NA	

The date of each amendment(s) adoption	: SEPTEMBER 12014 if other than the
date this document was signed.	COCCEPANATIONS OF CORPURATIONS
Effective date if applicable:	JEPICINBOR 1 2014 14 SEP-4 PM12: 49
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) for approval.
	by the shareholders through voting groups. The following statement of the group entitled to vote separately on the amendment(s):
"The number of votes cast for the	amendment(s) was/were sufficient for approval
by	<u> </u>
	(voting group)
The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
Dated 8 20	2014
Signature	lella monsen
selected, by an	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court ciary by that fiduciary)
 	ARDELLA M. SORENSEN
	(Typed or printed name of person signing)
	Secretary
	(Title of person signing)